## EXHIBIT

B

		CASE 0:15-md-02666-JNE-DTS	Dog. 828-2	: Filed (	<del>)9/12/17 Page 2 of 23</del>
		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER		CO	NFÍDENTIAL - SUBJECT TO PROTECTIVE ORDER
		1			3
	1	UNITED STATES DISTRICT COURT	1		PROCEEDINGS
	2	DISTRICT OF MINNESOTA	10:05:47 <b>2</b>	(Witr	ess sworn.)
	3		_ 3	}	ANTONIA B. HUGHES,
	4	In Re:	4	ļ	Called as a witness, being first
	5	Bair Hugger Forced Air Warming	5	;	duly sworn, was examined and
	6	Products Liability Litigation	6	;	testified as follows:
	7		7	,	EXAMINATION
	8	This Document Relates To:	8	BY MR. A	ASSAAD:
	9	All Actions MDL No. 15-2666 (JNE/FLM)	10:06:04	Q.	Can you please state your name?
	10		- 10:06:05 <b>10</b>	Α.	Antonia B Hughes.
	11		10:06:13 11	Q.	What's your current address?
	12		10:06:14 12	. A.	11 Carvel Circle, Edgewater, Maryland 21037.
	13	DEPOSITION OF ANTONIA B. HUGHES	10:06:20 13	Q.	Have you ever had your deposition taken
	14	VOLUME I, PAGES 1 - 189	10:06:22 14	before?	
	15	AUGUST 3, 2017	10:06:22 <b>15</b>		Once.
	16		10:06:23 16		Approximately how long ago?
	17		10:06:26 17		Five'ish years.
	18	(The following is the deposition of ANTON)			And was it as an expert in a case?
	19	B. HUGHES, taken pursuant to Notice of Taking	10:06:32		Yes.
	20	Deposition, via videotape, at the Hausfeld law firm,			What kind of case was it?
	21	1700 K Street Northwest, Suite 650, in the City of	10:06:33 20		
	22	Washington, District of Columbia, commencing at	10:06:36 21		A medical malpractice case.
	23	approximately 10:05 o'clock a.m., August 3, 2017.)	10:06:43 22		All right. And where was the case located?
	24		10:06:46 23		I believe it was Montgomery County here in
	25		10:06:48 24		here in Maryland, Montgomery County.
			10:06:51 <b>25</b>	6 Q.	Were you Were you an expert for the
		STIREWALT & ASSOCIATES 1-800-553-1953 info@stirewalt.com			STIREWALT & ASSOCIATES
		IFIDENTIAL - SUBJECT TO PROTECTIVE ORDER			1-800-553-1953 info@stirewalt.com
_		2		CO	NFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
1 2	APPEARA On Be	NCES: half of the Plaintiffs:			4
3		briel Assaad NNEDY HODGES	10:06:53 <b>1</b>	plaintiff	or the defense?
4	44	09 Montrose Boulevard	10:06:58 <b>2</b>	. <b>A</b> .	Not The plaintiff is the one asking for
5		ite 200 uston, Texas 77006	10:07:01 <b>3</b>	injuries?	
6		nevieve M. Zimmerman	10:07:01 <b>4</b>	Q.	Yes.
_	M E	SHBESHER & SPENCE, LTD.	10:07:01 5	. A.	No. For the defense.
7		16 Park Avenue nneapolis, Minnesota 55404	10:07:04 6		
8			10.07.04		Do you recall who the attorneys were?
•	On Ra	half of the Defendants:	10:07:04 <b>7</b>	Q.	Do you recall who the attorneys were?
9		half of the Defendants:		Q.	
	De	half of the Defendants: borah E. Lewis ACKWELL BURKE P.A.	10:07:05 7	Q. A. Q.	No.
9 10	D e B L 4 3	borah E. Lewis ACKWELL BURKE P.A. 1 South Seventh Street	10:07:05 <b>7</b>	Q. A. Q. A.	No.  Do you recall the name of the case?
9 10 11	D e B L 4 3 S u	borah E. Lewis ACKWELL BURKE P.A.	10:07:05 <b>7</b> 10:07:06 <b>8</b> 10:07:08 <b>9</b>	Q. A. Q. A. Q. Q.	No.  Do you recall the name of the case?  No.
9 10 11 12	D e B L 4 3 S u	borah E. Lewis ACKWELL BURKE P.A. 1 South Seventh Street ite 2500 nneapolis, Minnesota 55415	10:07:05 <b>7</b> 10:07:06 <b>8</b> 10:07:08 <b>9</b> 10:07:10 <b>10</b>	Q. A. Q. A. Q.	No.  Do you recall the name of the case?  No.  Did you testify Did you actually
9 10 11	De BL 43 Su Mi	borah E. Lewis ACKWELL BURKE P.A. 1 South Seventh Street ite 2500 nneapolis, Minnesota 55415	10:07:05 <b>7</b> 10:07:06 <b>8</b> 10:07:08 <b>9</b> 10:07:10 <b>10</b> 10:07:13 <b>11</b>	Q. A. Q. A. Q. A.	No.  Do you recall the name of the case?  No.  Did you testify Did you actually  Did you testify at trial?
9 10 11 12	De BL 43 Su Mi ALSO PRE	borah E. Lewis ACKWELL BURKE P.A. 1 South Seventh Street ite 2500 nneapolis, Minnesota 55415	10:07:05 <b>7</b> 10:07:06 <b>8</b> 10:07:08 <b>9</b> 10:07:10 <b>10</b> 10:07:13 <b>11</b>	Q. A. Q. A. Q. A. Q.	No.  Do you recall the name of the case?  No.  Did you testify Did you actually  Did you testify at trial?  No. It was dismissed before trial.
9 10 11 12 13	De BL 43 Su Mi ALSO PRE	borah E. Lewis ACKWELL BURKE P.A. 1 South Seventh Street ite 2500 nneapolis, Minnesota 55415 SENT:	10:07:05	Q. A. Q. A. Q. A. Q. know?	No.  Do you recall the name of the case?  No.  Did you testify Did you actually  Did you testify at trial?  No. It was dismissed before trial.
9 10 11 12 13 14	De BL 43 Su Mi ALSO PRE Ronald Angel	borah E. Lewis ACKWELL BURKE P.A. 1 South Seventh Street ite 2500 nneapolis, Minnesota 55415 ESENT: d M. Huber, Videographer Dorsey, Hausfeld Law Firm EXAMINATION INDEX EXAMINED BY PAGE	10:07:05 7 10:07:06 8 10:07:08 9 10:07:10 10 10:07:13 11 10:07:13 12 10:07:16 13 10:07:19 14 10:07:20 15	Q. A. Q. A. Q. A. Q. know?	No.  Do you recall the name of the case?  No.  Did you testify Did you actually  Did you testify at trial?  No. It was dismissed before trial.  Was it dismissed, or settled, or you don't  I don't know. I was informed that the case
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9 10 11 12 13 14 15 16	De BL 43 Su Mi ALSO PRE Ronali Angel WITNESS Ms. Hugh	borah E. Lewis  ACKWELL BURKE P.A.  1 South Seventh Street ite 2500 nneapolis, Minnesota 55415  SENT:  d M. Huber, Videographer Dorsey, Hausfeld Law Firm  EXAMINATION INDEX EXAMINED BY es Mr. Assaad Ms. Lewis 181  EXHIBIT INDEX	10:07:05 7 10:07:06 8 10:07:08 9 10:07:10 10 10:07:13 11 10:07:16 13 10:07:16 13 10:07:20 15 10:07:21 16 10:07:24 17	Q. A. Q. A. Q. A. Q. know? A. had been	No.  Do you recall the name of the case?  No.  Did you testify Did you actually  Did you testify at trial?  No. It was dismissed before trial.  Was it dismissed, or settled, or you don't  I don't know. I was informed that the case resolved and to destroy the records.  Okay. Do you recall any of the attorneys in
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9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Dee BL 43 Su Mi ALSO PRE Ronald Angel WITNESS Ms. Hugh	borah E. Lewis  ACKWELL BURKE P.A.  1 South Seventh Street ite 2500 nneapolis, Minnesota 55415  SENT:  d M. Huber, Videographer Dorsey, Hausfeld Law Firm  EXAMINATION INDEX EXAMINED BY PAGE es Mr. Assaad 3, 184 Ms. Lewis 181  EXHIBIT INDEX DESCRIPTION PAGE  Letter report, Hughes to Lewis, 22 June 1, 2017, 7 pgs. Subpoena for production to Antonia 38 Hughes, 6/7/2017, 8 pgs. CV, Antonia B. Hughes, 3 pgs. CV, Antonia B. Hughes, 3 pgs. Statements, Hughes to Blackwell 99 Burke, May and June 2017, 2 pgs. Expert Report of Dr. Michael J. 177	10:07:05	Q. A. Q. A. Q. A. Q. know? A. had been Q. the case A. Q. regardin same pa A. Q. today ab	No.  Do you recall the name of the case?  No.  Did you testify Did you actually  Did you testify at trial?  No. It was dismissed before trial.  Was it dismissed, or settled, or you don't  I don't know. I was informed that the case resolved and to destroy the records.  Okay. Do you recall any of the attorneys in?  No.  Well I'm going to go through a few rules g this deposition just so we're all on the ge. You understand?  Okay.  I'm going to ask you numerous questions

	CASL 0:15 mg 02666 JNL D S DO	<del>9. 828-2</del>	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	5		7
10:07:48	question, please let me know. Fair?	10:10:15	Q. And why don't you if you can briefly go
10:07:50 <b>2</b>	A. Yes.	10:10:18 2	through your educational background?
•	Q. If you answer the question that I ask, I'll		<b>A.</b> Okay. I graduated from a nursing diploma
4		1	
10:07:53 4	assume that you understood the question. Fair?	10:10:24 4	program in 1974, became certified in operating room
10:07:54 <b>5</b>	A. Yes.	10:10:28 5	nursing in 1983, and have maintained that
10:07:56	<b>Q.</b> At any time you want to take a break, that's	10:10:30 6	certification. I received my Bachelor's of Nursing
10:07:57 <b>7</b>	fine, but I ask that you only request a break after	10:10:34 7	from the college of Notre Dame in 1995, and my
10:08:00 <b>8</b>	you answer a pending question. Fair?	10:10:38	Master's of Arts in administration at the college of
10:08:02	A. Okay. Yes.	10:10:42	Notre Dame. Both of those are in Baltimore.
10:08:07 10	Q. And at any time that you that during	10:10:47 10	Q. You received your bachelor's in nursing in
10:08:10 11	the deposition you realize that a ques answer you	10:10:50 11	
10:08:15 12	gave me was incorrect or incomplete, or you want to	10:10:50 12	A. Yes.
10:08:18 13	add something, just please let me know and we can	10:10:50 13	
10:08:21 14	always go back. Fair?	10:10:51 14	A. Yes.
10:08:22 15	<b>A.</b> Yes.	10:10:52 15	<b>Q.</b> Okay. And so what did you receive in 1974?
10:08:23 16	<b>Q.</b> And you're doing a good job by answering	10:10:54 16	<b>A.</b> A diploma in nursing. It was a different
10:08:25 17	verbally, but please don't just shake your head or go	10:10:57 17	type of nursing curriculum, it was a three-year
10:08:31 18	hmm-umm or uh-huh because it's very difficult for the	10:11:01 18	program
10:08:33 19	court reporter to to transcribe, and that's all we	10:11:02 19	<b>Q.</b> Okay.
10:08:36 <b>20</b>	have here is the transcription of the deposition. You	10:11:02 20	A with some college credits and some
10:08:38 21	understand?	10:11:04 21	clinical.
10:08:38 21	A. Yes.	10:11:04 21	
			,
10:08:39 23	<b>Q.</b> And you're also doing a very good job by	10:11:07 23	after you finished in 1974?
10:08:42 <b>24</b>	waiting for me to finish my question before you answer	10:11:09 <b>24</b>	A. Yes.
10:08:44 <b>25</b>	and so we don't talk over each other, because that's	10:11:09 <b>25</b>	<b>Q.</b> Okay. Why did you decide to go back to
	STIREWALT & ASSOCIATES		STIREWALT & ASSOCIATES
	1-800-553-1953 info@stirewalt.com		1-800-553-1953 info@stirewalt.com
	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	1	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	6		8
10:08:47	also difficult for the court reporter. Fair?	10:11:11 1	college to get your bachelor's in nursing?
10:08:48 2	A. Yes.	10:11:13	<b>A.</b> Good question. I wanted some different
10:08:50	<b>Q.</b> Okay. With respect to the deposition you	10:11:15 3	opportunities.
4		_	• •
10:09:01 4	did five years ago, what were the issues in that case?	10:11:15 4	Q. Okay. And I take it you needed your
10:09:04 <b>5</b>	<b>A.</b> It was issues of whether or not a medical	10:11:18 5	bachelor's to go receive a master's?
10:09:07 6	test that had been performed were the results were	10:11:20 6	A. Yes.
10:09:11 7	given to the surgeon in a timely manner.	10:11:21 7	<b>Q.</b> Did you go straight through from your
10:09:13	<b>Q.</b> Okay. What medical tests?	10:11:26	Bachelor's of Science in nursing to your Master's of
10:09:17	<b>A.</b> It was a chest x-ray.	10:11:29	Arts in management?
10:09:21 10	Q. Was it a wrongful death case?	10:11:30 10	<b>A.</b> I had about a year off.
10:09:23 11	A. The patient subsequently died, but she was	10:11:32 11	<b>Q.</b> And during that time were you continually
10:09:26 12	not deceased during the time that I was	10:11:34 12	employed as a nurse?
10:09:26 12	Q. And what was	10:11:34 12	<b>A.</b> Yes. I was full-time employed all of the
			• •
10:09:31 14	A. Involved.	10:11:37 14	time I was in school.
10:09:32 15	Q. Sorry.	10:11:38 15	Q. And where were you employed?
10:09:32 16	What was the alleged misdiagnosis?	10:11:40 16	<b>A.</b> At that time, Anne Arundel Medical Center in
10:09:41 17	A. Lung cancer.	10:11:42 17	Annapolis.
10:09:44 18	Q. Do you recall what hospital?	10:11:43 18	Q. And you also mentioned in 1983 you became a
10:09:46 19	<b>A.</b> No.	10:11:47 19	a certified operating room nurse?
10:09:47 <b>20</b>	Q. Was it, like, Shady Grove?	10:11:50 20	A. Yes.
10:09:50 21	<b>A.</b> I I don't remember if it was Shady Grove	10:11:51 21	Q. What does that entail?
10:09:50 21	•	10:11:51 21	A. The initial certification is an exam based
	or Holy Cross, it was I don't truly don't		
10:09:55 23	remember.	10:11:57 23	on current practices in OR nursing and patient case
10:09:56 <b>24</b>	Q. And you're a Registered Nurse?	10:12:03 <b>24</b>	care care scenarios.
10:10:14 <b>25</b>	A. Yes.	10:12:08 <b>25</b>	<b>Q.</b> So after that period of time did you mostly
	STIREWALT & ASSOCIATES		STIREWALT & ASSOCIATES
	1-800-553-1953 info@stirewalt.com		1-800-553-1953 info@stirewalt.com
2 of 49 shee	<del>_</del>	to 8 of 189	1-800-553-1953 info@stirewalt.com 08/07/2017 11:59

	CASE 0:15-md-02666-JNE-DTS Doc CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>. 828-2</del>	Filed 09/12/17 Page 4 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
10:12:12	9 work in an operating room?	10:14:48 1	11 <b>Q.</b> Okay. And with respect to equipment, what
10:12:12	<b>A.</b> Yes. The whole time.	10:14:48 <b>2</b>	equipment would you be asked to
10:12:16 3	<b>Q.</b> And that would be at Anne Arundel County?	10:14:50 <b>2</b>	A. Things about
10:12:19 4	<b>A.</b> No. I worked at Anne Arundel for 15 years,	10:14:50	Q look at?
10:12:22 <b>5</b>	then I went to Hopkins Bayview, then I went to Calvert	10:14:54 <b>5</b>	A. Things about positioning, safely positioning
10:12:25 6	Memorial down in Prince Frederick, and then went to	10:14:57	the patient.
10:12:28 7	Baltimore Washington Medical Center.	10:14:57 7	<b>Q.</b> Is that equipment, or is that some would
10:12:31	(Interruption by the reporter.)	10:14:59	that be more of patient care?
10:12:32	A. Baltimore Washington Medical Center in Glen	10:15:00 9	A. Both.
10:12:33	Burnie.	10:15:01 10	Q. Okay.
10:12:34 11	<b>Q.</b> Okay. Tell me more about your certification	10:15:01 11	A. It would be both, truly.
10:12:37 12	for an operating room nurse. What does that entail?	10:15:03 12	If a patient has a fracture you need to know
10:12:39 13	<b>A.</b> It's You need two years of eligibility,	10:15:05 13	how to safely use the fracture table, that would be an
10:12:42 14	which means you need to have been employed as an OR	10:15:08 14	equipment, but then also position the patient safely
10:12:45 15	nurse for at least two years. And other than that you	10:15:11 15	so that they don't have any skin or neurological
10:12:48 16	need to be a Registered Nurse. And other than that it	10:15:11 16	injuries being positioned on that table.
10:12:46 17	is a preparation, studying, reviewing case studies.	10:15:18 17	<b>Q.</b> What other equipment?
10:12:57 18	And the organization that administers the test gives	10:15:21 18	<b>A.</b> An overview of an anesthesia machine, how to
10:13:03 19	prep courses and gives you ideas of what material	10:15:23 19	supply not to administer anesthesia, but how to
10:13:06 <b>20</b>	should be studied. It's material about generic	10:15:27 <b>20</b>	administer oxygen. There's usually another oxygen
10:13:10 21	nursing, what would a nurse do, but also specific to	10:15:31 21	port, and in an emergency you'd need to know where
10:13:14 22	the OR.	10:15:34 22	that's located to support a patient.
10:13:15 23	Q. Okay. So let's get into more specifics	10:15:37 23	Q. Did you go into the different types of
10:13:17 24	about that.	10:15:39 <b>24</b>	patient-warming devices?
10:13:17 <b>25</b>	A. Okay.	10:15:41 <b>25</b>	A. I would say no. They talk
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	1-800-553-1953 info@stirewalt.com		1-800-553-1953 info@stirewalt.com
	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	10		12
10:13:18 1	Q. What would be the curricula with respect to	10:15:43	Patient-warming devices would be in more on
10:13:24 <b>2</b>	what are the materials that you would be looking at or	10:15:47 <b>2</b>	hypothermia and how to prevent hypothermia.
10:13:26 3	asked to be studying in preparation	10:15:49 3	<b>Q.</b> Is that part of the OR certification?
10:13:26 4	A. One of them is	10:15:51 4	A. It would be a question like what are SCIP
10:13:27 <b>5</b>	Q in preparation of the exam?	10:15:54 <b>5</b>	guidelines. SCIP guidelines are antibiotics timing,
10:13:28 6	A. Okay. One is a textbook called Alexander's	10:16:01 6	normothermia, blood glucose monitoring, not shaving
10:13:33 7	Care of the Patient in Surgery. Another would be the	10:16:06 7	the patient, but clipping, the bathing of the patient
10:13:37 <b>8</b>	current Guidelines to Perioperative Practice, which is	10:16:11 8	pre-op. Those are the things all sort of encompassed
10:13:42	published by AORN. Another is Berry & Kohn's, trying	10:16:14 9	in the SCIP guidelines.
10:13:50 10	to remember the title, I think it's Surgical Care.	10:16:16 10	Q. I understand that, but were the SCIP
10:13:54 11	Don't quoto ma on that title but it's Parry Q. Kahn's	10:16:19 11	guidelines with
	Don't quote me on that title, but it's Berry & Kohn's		garaemies men
10:13:57 12	is another textbook that's a good basis for	10:16:19 12	A. Would they be
		10:16:19 <b>12</b> 10:16:20 <b>13</b>	-
10:14:00 13	is another textbook that's a good basis for		<b>A.</b> Would they be
10:14:00 <b>13</b> 10:14:02 <b>14</b> 10:14:06 <b>15</b>	is another textbook that's a good basis for certification review. They also have flash cards,	10:16:20 13	<ul><li>A. Would they be</li><li>Q normothermia were there in 1983?</li></ul>
10:14:00 <b>13</b> 10:14:02 <b>14</b> 10:14:06 <b>15</b>	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look	10:16:20 <b>13</b> 10:16:23 <b>14</b> 10:16:25 <b>15</b> 10:16:26 <b>16</b>	<ul><li>A. Would they be</li><li>Q normothermia were there in 1983?</li><li>A. In nineteen Are you asking me about my</li></ul>
10:14:00 <b>13</b> 10:14:02 <b>14</b> 10:14:06 <b>15</b> 10:14:07 <b>16</b>	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look at the format of the questions.	10:16:20 <b>13</b> 10:16:23 <b>14</b> 10:16:25 <b>15</b>	<ul> <li>A. Would they be</li> <li>Q normothermia were there in 1983?</li> <li>A. In nineteen Are you asking me about my test from nineteen</li> </ul>
10:14:00	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look at the format of the questions.  Q. And what are the subject areas that you're looking at?  A. Preoperative nursing, intraoperative	10:16:20 13 10:16:23 14 10:16:25 15 10:16:26 16 10:16:26 17 10:16:29 18	<ul> <li>A. Would they be</li> <li>Q normothermia were there in 1983?</li> <li>A. In nineteen Are you asking me about my test from nineteen</li> <li>Q. Oh yeah.</li> <li>A. Oh, I can't remember my test from 1983.</li> <li>Q. But I'm looking at the subject areas.</li> </ul>
10:14:00 13 10:14:02 14 10:14:06 15 10:14:07 16 10:14:09 17 10:14:16 18 10:14:20 19	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look at the format of the questions.  Q. And what are the subject areas that you're looking at?  A. Preoperative nursing, intraoperative nursing, some equipment questions, some holistic	10:16:20 13 10:16:23 14 10:16:25 15 10:16:26 16 10:16:26 17 10:16:29 18 10:16:31 19	<ul> <li>A. Would they be</li> <li>Q normothermia were there in 1983?</li> <li>A. In nineteen Are you asking me about my test from nineteen</li> <li>Q. Oh yeah.</li> <li>A. Oh, I can't remember my test from 1983.</li> <li>Q. But I'm looking at the subject areas.</li> <li>A. Oh, the subject areas would be similar, but</li> </ul>
10:14:00 13 10:14:02 14 10:14:06 15 10:14:07 16 10:14:09 17 10:14:16 18 10:14:20 19 10:14:25 20	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look at the format of the questions.  Q. And what are the subject areas that you're looking at?  A. Preoperative nursing, intraoperative nursing, some equipment questions, some holistic questions about materials management, hospital	10:16:20 13 10:16:23 14 10:16:25 15 10:16:26 16 10:16:26 17 10:16:29 18 10:16:31 19 10:16:33 20	<ul> <li>A. Would they be</li> <li>Q normothermia were there in 1983?</li> <li>A. In nineteen Are you asking me about my test from nineteen</li> <li>Q. Oh yeah.</li> <li>A. Oh, I can't remember my test from 1983.</li> <li>Q. But I'm looking at the subject areas.</li> <li>A. Oh, the subject areas would be similar, but the equipment, I don't know that we were talking about</li> </ul>
10:14:00 13 10:14:02 14 10:14:06 15 10:14:07 16 10:14:09 17 10:14:16 18 10:14:20 19 10:14:25 20 10:14:28 21	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look at the format of the questions.  Q. And what are the subject areas that you're looking at?  A. Preoperative nursing, intraoperative nursing, some equipment questions, some holistic questions about materials management, hospital administration, staffing, budgets. Some questions on	10:16:20 13 10:16:23 14 10:16:25 15 10:16:26 16 10:16:26 17 10:16:29 18 10:16:31 19 10:16:33 20 10:16:36 21	<ul> <li>A. Would they be</li> <li>Q normothermia were there in 1983?</li> <li>A. In nineteen Are you asking me about my test from nineteen</li> <li>Q. Oh yeah.</li> <li>A. Oh, I can't remember my test from 1983.</li> <li>Q. But I'm looking at the subject areas.</li> <li>A. Oh, the subject areas would be similar, but the equipment, I don't know that we were talking about hypothermia in 1983.</li> </ul>
10:14:00 13 10:14:02 14 10:14:06 15 10:14:07 16 10:14:09 17 10:14:16 18 10:14:20 19 10:14:25 20 10:14:28 21 10:14:35 22	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look at the format of the questions.  Q. And what are the subject areas that you're looking at?  A. Preoperative nursing, intraoperative nursing, some equipment questions, some holistic questions about materials management, hospital administration, staffing, budgets. Some questions on cultural diversity, and some I think that's the	10:16:20 13 10:16:23 14 10:16:25 15 10:16:26 16 10:16:26 17 10:16:29 18 10:16:31 19 10:16:33 20 10:16:36 21 10:16:38 22	<ul> <li>A. Would they be</li> <li>Q normothermia were there in 1983?</li> <li>A. In nineteen Are you asking me about my test from nineteen</li> <li>Q. Oh yeah.</li> <li>A. Oh, I can't remember my test from 1983.</li> <li>Q. But I'm looking at the subject areas.</li> <li>A. Oh, the subject areas would be similar, but the equipment, I don't know that we were talking about hypothermia in 1983.</li> <li>Q. Okay.</li> </ul>
10:14:00 13 10:14:02 14 10:14:06 15 10:14:07 16 10:14:09 17 10:14:16 18 10:14:20 19 10:14:25 20 10:14:25 21 10:14:35 22 10:14:43 23	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look at the format of the questions.  Q. And what are the subject areas that you're looking at?  A. Preoperative nursing, intraoperative nursing, some equipment questions, some holistic questions about materials management, hospital administration, staffing, budgets. Some questions on cultural diversity, and some I think that's the I'm trying to remember the breakdown. It's like a	10:16:20 13 10:16:23 14 10:16:25 15 10:16:26 16 10:16:26 17 10:16:29 18 10:16:31 19 10:16:33 20 10:16:36 21 10:16:38 22 10:16:40 23	<ul> <li>A. Would they be</li> <li>Q normothermia were there in 1983?</li> <li>A. In nineteen Are you asking me about my test from nineteen</li> <li>Q. Oh yeah.</li> <li>A. Oh, I can't remember my test from 1983.</li> <li>Q. But I'm looking at the subject areas.</li> <li>A. Oh, the subject areas would be similar, but the equipment, I don't know that we were talking about hypothermia in 1983.</li> <li>Q. Okay.</li> <li>A. I I misunderstood. I thought you meant</li> </ul>
10:13:57 12 10:14:00 13 10:14:02 14 10:14:05 15 10:14:07 16 10:14:09 17 10:14:16 18 10:14:25 20 10:14:28 21 10:14:35 22 10:14:43 23 10:14:45 24	is another textbook that's a good basis for certification review. They also have flash cards, they also have test questions online to help you look at the format of the questions.  Q. And what are the subject areas that you're looking at?  A. Preoperative nursing, intraoperative nursing, some equipment questions, some holistic questions about materials management, hospital administration, staffing, budgets. Some questions on cultural diversity, and some I think that's the I'm trying to remember the breakdown. It's like a breakdown of five categories, but I don't have that in	10:16:20 13 10:16:23 14 10:16:25 15 10:16:26 16 10:16:26 17 10:16:29 18 10:16:31 19 10:16:33 20 10:16:36 21 10:16:38 22 10:16:40 23 10:16:42 24	<ul> <li>A. Would they be</li> <li>Q normothermia were there in 1983?</li> <li>A. In nineteen Are you asking me about my test from nineteen</li> <li>Q. Oh yeah.</li> <li>A. Oh, I can't remember my test from 1983.</li> <li>Q. But I'm looking at the subject areas.</li> <li>A. Oh, the subject areas would be similar, but the equipment, I don't know that we were talking about hypothermia in 1983.</li> <li>Q. Okay.</li> <li>A. I I misunderstood. I thought you meant current.</li> </ul>
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	CASE 0:15-md-02666-JNE-DTS Do	828-2 Filed 09/12/17 Page 5 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORD	FR
	17	19	、
10:21:09	no.	10.23.37 <b>1</b> to coordinate, facilitate a course called Periop 101,	
10:21:09 2	Q. Okay. So roughly speaking between 2000 and	10.23.43 <b>2</b> which is an introductory course for nurses who are not	
10:21:12 3	2015, approximately how many times a year would you be	10.23.46 <b>3</b> familiar with the clinical environment in the OR.	
10:21:17 4	involved as	10.23:49 <b>4</b> It's a six-month program. It has some didactic	
10:21:18 5	A. Depending on	10.23:54 <b>5</b> material provided by AORN, and then I provide the	
10:21:22 6	(Interruption by the reporter.)	10.23:59 <b>6</b> clinical experiences and hopefully put the two	
10:21:22 7	Q as a nurse in an operating room in a	10.24.01 <b>7</b> together for the individuals.	
10:21:24	non-supervisory role, actually doing work?	Q. And what subjects are taught or what areas	
10:21:27	<b>A.</b> So the question is from 2000 to 2015.	10:24:04 <b>9</b> are taught in the Perioperative 101?	
10:21:31 10	<b>Q.</b> Yes.	10.24:07 <b>10 A.</b> I couldn't begin to list them. It's about	
10:21:32 11	<b>A.</b> I don't know that I can pull out a number.	10:24:13 <b>11</b> 50 modules in the didactic, so to go through and name	
10:21:37 12	Q. Was it like once a month, twice a month,	10:24:18 <b>12</b> them, I I couldn't begin to do that.	
10:21:40 13	once a year?	10:24:22 <b>13 Q.</b> Do you discuss	
10:21:43 14	<b>A.</b> Depending on the year, perhaps once a month.	10:24:23 <b>14 A.</b> I would I would miss some.	
10:21:46 15	Q. Okay. And since 2000 to 2015, how often	10:24:24 <b>15 Q.</b> Okay. But do you discuss normothermia?	
10:21:51 16	would you be involved as a nurse in a total hip or	10.24.28 <b>16 A.</b> Yes.	
10:21:54 17	total knee arthroplasty?	10.24.29 <b>17 Q.</b> Do you discuss patient prep?	
10:21:56 18	<b>A.</b> Is that the same question?	10.24:33 <b>18 A.</b> Yes. Not only discuss, but demonstrate and	
10:21:58 19	Q. Well one was more general, in all types of	10.24:39 <b>19</b> teach back.	
10:21:58 20		10.2439 <b>Q.</b> Okay. Are there any modules with respect to	
10:22:01 <b>21</b>	I assume you just didn't handle total hip or	10.24:48 <b>21</b> different types of surgeries, such as surgeries	
10:22:04 <b>22</b>	total knee; correct?	10.24:50 <b>22</b> pertaining to total hip or total knee?	
10:22:06 23	A. Correct. But I misunderstood your first	10:24:52 <b>23 A.</b> Yes.	
10:22:09 <b>24</b>	question.	10.24:57 <b>24 Q.</b> Are total hip and total knee surgeries	
10:22:10 <b>25</b>	Q. Okay.	10.25.00 <b>25</b> different than other surgeries?	
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	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 18	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORD 20	ER
10:22:10 <b>1</b>			ER
10:22:10 <b>1</b> 10:22:12 <b>2</b>	18	20	ER
	18 <b>A.</b> I thought you were asking about numbers of	20 10:25:04 <b>A.</b> The difference is the amount of traffic in	ER
10:22:12	A. I thought you were asking about numbers of times I had done total knees or hips from 2000 to	10.25.04 <b>1 A.</b> The difference is the amount of traffic in the room. There are not extra individuals in the room	ER
10:22:12 <b>2</b> 10:22:16 <b>3</b>	A. I thought you were asking about numbers of times I had done total knees or hips from 2000 to 2015.	10.25:04  1 A. The difference is the amount of traffic in 10.25:07  2 the room. There are not extra individuals in the room 10.25:10  3 other than the staff assigned to that room.	ER
10:22:12 <b>2</b> 10:22:16 <b>3</b> 10:22:17 <b>4</b>	A. I thought you were asking about numbers of times I had done total knees or hips from 2000 to 2015.  Q. Okay. So my understanding, based on your	1	ER
10:22:12 <b>2</b> 10:22:16 <b>3</b> 10:22:17 <b>4</b> 10:22:19 <b>5</b>	A. I thought you were asking about numbers of times I had done total knees or hips from 2000 to 2015.  Q. Okay. So my understanding, based on your statement, is between 2000 and 2015 you were probably	1 A. The difference is the amount of traffic in 10:25:07 2 the room. There are not extra individuals in the room 10:25:10 3 other than the staff assigned to that room. 10:25:12 4 Q. Why aren't there 10:25:13 5 Why is that?	
10:22:12 <b>2</b> 10:22:16 <b>3</b> 10:22:17 <b>4</b> 10:22:19 <b>5</b> 10:22:22 <b>6</b>	A. I thought you were asking about numbers of times I had done total knees or hips from 2000 to 2015.  Q. Okay. So my understanding, based on your statement, is between 2000 and 2015 you were probably involved with one total knee or total hip arthroplasty	1 A. The difference is the amount of traffic in 10:25:07 2 the room. There are not extra individuals in the room 10:25:10 3 other than the staff assigned to that room. 10:25:12 4 Q. Why aren't there 10:25:13 5 Why is that? 10:25:15 6 A. We want to decrease the traffic, potential	
10:22:12 <b>2</b> 10:22:16 <b>3</b> 10:22:17 <b>4</b> 10:22:19 <b>5</b> 10:22:22 <b>6</b> 10:22:26 <b>7</b>	A. I thought you were asking about numbers of times I had done total knees or hips from 2000 to 2015.  Q. Okay. So my understanding, based on your statement, is between 2000 and 2015 you were probably involved with one total knee or total hip arthroplasty per month.	1 A. The difference is the amount of traffic in 10.25.07 2 the room. There are not extra individuals in the room 10.25.10 3 other than the staff assigned to that room. 10.25.12 4 Q. Why aren't there 10.25.13 5 Why is that? 10.25.15 6 A. We want to decrease the traffic, potential 10.25.20 7 door openings and closings, any unnecessary movement	
10:22:12 <b>2</b> 10:22:16 <b>3</b> 10:22:17 <b>4</b> 10:22:19 <b>5</b> 10:22:22 <b>6</b> 10:22:26 <b>7</b> 10:22:26 <b>8</b>	A. I thought you were asking about numbers of times I had done total knees or hips from 2000 to 2015.  Q. Okay. So my understanding, based on your statement, is between 2000 and 2015 you were probably involved with one total knee or total hip arthroplasty per month.  A. Correct.	1 A. The difference is the amount of traffic in 10:25:07 2 the room. There are not extra individuals in the room 10:25:10 3 other than the staff assigned to that room. 10:25:12 4 Q. Why aren't there 10:25:13 5 Why is that? 10:25:15 6 A. We want to decrease the traffic, potential 10:25:20 7 door openings and closings, any unnecessary movement 10:25:24 8 Q. Why? If you know.	
10:22:12	A. I thought you were asking about numbers of times I had done total knees or hips from 2000 to 2015.  Q. Okay. So my understanding, based on your statement, is between 2000 and 2015 you were probably involved with one total knee or total hip arthroplasty per month.  A. Correct. Q. Okay. What about overall all types of	1 A. The difference is the amount of traffic in 10.25.07 2 the room. There are not extra individuals in the room 10.25.10 3 other than the staff assigned to that room. 10.25.12 4 Q. Why aren't there 10.25.13 5 Why is that? 10.25.15 6 A. We want to decrease the traffic, potential 10.25.20 7 door openings and closings, any unnecessary movement 10.25.24 8 Q. Why? If you know. 10.25.34 9 A. The best answer is I've read that that will	
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	CASE 0:15-md-02666-JNE-DTS Doc CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>. 828-2</del>	Filed 09/12/17 Page 6 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
		. 525 2	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	21	_	23
10:26:16	you're I mean, pretend I'm a student and I say,	10:28:46 <b>1</b>	<b>A.</b> I think the only correction I (Witness
10:26:21 2	okay, but why is it different for total hip and total	10:28:46 2	reviewing exhibit.)
10:26:23	knee not to to have less traffic?	10:29:03	No. I do not.
10:26:25 4	<b>A.</b> There is a prosthesis involved. This is not	10:29:05 4	<b>Q.</b> Okay. And is your report a complete list of
10:26:28 <b>5</b>	just total hips and total knees, I will go back and	10:29:12 <b>5</b>	all the opinions in this in the case that you have?
10:26:31 6	clarify your question. It's also for any patient	10:29:15	A. That I have
10:26:33 7	that's having a prostheses; whether it's a hernia	10:29:15 7	Q. Yes.
10:26:37	repair with mesh, a breast implant after	10:29:16	A personally? Yes.
10:26:40	reconstruction. Any patient that will have a	10:29:18	Q. Okay. And everything in your
10:26:44 10	potential for an a implant we want to be sure that	10:29:19 10	And all the material that you rely upon to
10:26:48 11	the traffic is to a minimum,	10:29:21 11	support your opinions are in the report; correct?
10:26:48 12	Q. What is	10:29:24 12	A. Yes.
10:26:51 13	<b>A.</b> to decrease door openings. We want to	10:29:24 13	<b>Q.</b> Okay. And you wrote this report yourself;
10:26:54 14	keep the positive pressure that's in the room going	10:29:31 14	correct?
10:26:58 15	and circulating the air as best as possible. When the	10:29:31 15	<b>A.</b> Yes.
10:27:02 16	door opens and closes numerous times, that positive	10:29:31 16	Q. Okay. Did you have any help writing this
10:27:06 17	pressure is disrupt potentially disrupted.	10:29:33 17	report?
10:27:08 18	Q. But, so what? The temperature It's	10:29:34 18	A. No.
10:27:12 19	disrupted. How does that affect the patient outcome?	10:29:34 19	Q. Okay. Did anyone offer any comments to you
10:27:14 <b>20</b>	<b>A.</b> The correlation between the research is that	10:29:38 <b>20</b>	regarding the report?
10:27:17 <b>21</b>	there is a correlation between disruption of the	10:29:40 <b>21</b>	A. No.
10:27:20 <b>22</b>	positive pressure and increased risk for surgical-site	10:29:41 <b>22</b>	<b>Q.</b> Okay. Did you discuss your opinions with
10:27:25 23	infections.	10:29:46 <b>23</b>	anyone besides counsel?
10:27:26 <b>24</b>	Q. And do you have a a an article that	10:29:47 <b>24</b>	<b>A.</b> No.
10:27:31 <b>25</b>	you could refer me to, a peer-reviewed article?	10:29:51 <b>25</b>	Q. Did you look at any other
	STIREWALT & ASSOCIATES		STIREWALT & ASSOCIATES
	1-800-553-1953 info@stirewalt.com		1-800-553-1953 info@stirewalt.com
	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	22		24
10:27:35	<b>A.</b> Yes.	10:29:54 1	24 With respect to your references 1 through 7
10:27:37 2	A. Yes. Q. And by the way,	10:29:55 2	With respect to your references 1 through 7 on page 7 of your report, did you independently
10:27:37 <b>2</b> 10:27:38 <b>3</b>	A. Yes. Q. And by the way, A. But I don't I know I know	10:29:55 <b>2</b> 10:30:01 <b>3</b>	With respect to your references 1 through 7 on page 7 of your report, did you independently provide these references, or were these given to you
10:27:37 <b>2</b> 10:27:38 <b>3</b> 10:27:39 <b>4</b>	A. Yes.  Q. And by the way, A. But I don't I know I know Q she can't give you any answers.	10:29:55 <b>2</b> 10:30:01 <b>3</b> 10:30:05 <b>4</b>	With respect to your references 1 through 7 on page 7 of your report, did you independently provide these references, or were these given to you by somebody?
10:27:37 <b>2</b> 10:27:38 <b>3</b> 10:27:39 <b>4</b> 10:27:41 <b>5</b>	A. Yes.  Q. And by the way, A. But I don't I know I know Q she can't give you any answers. A. No, I know. I'm trying to remember the name	10:29:55 <b>2</b> 10:30:01 <b>3</b> 10:30:05 <b>4</b> 10:30:06 <b>5</b>	With respect to your references 1 through 7 on page 7 of your report, did you independently provide these references, or were these given to you by somebody?  A. Oh, no. I provided them.
10:27:37 <b>2</b> 10:27:38 <b>3</b> 10:27:39 <b>4</b> 10:27:41 <b>5</b> 10:27:43 <b>6</b>	A. Yes. Q. And by the way, A. But I don't I know I know Q she can't give you any answers. A. No, I know. I'm trying to remember the name of the author. I'm sorry.	10:29:55 <b>2</b> 10:30:01 <b>3</b> 10:30:05 <b>4</b> 10:30:06 <b>5</b> 10:30:08 <b>6</b>	With respect to your references 1 through 7 on page 7 of your report, did you independently provide these references, or were these given to you by somebody?  A. Oh, no. I provided them.  Q. Okay. Do you know any of the authors that
10:27:37 <b>2</b> 10:27:38 <b>3</b> 10:27:39 <b>4</b> 10:27:41 <b>5</b> 10:27:43 <b>6</b> 10:27:43 <b>7</b>	A. Yes.  Q. And by the way, A. But I don't I know I know Q she can't give you any answers. A. No, I know. I'm trying to remember the name of the author. I'm sorry. I believe it's on my statement. I believe I	10:29:55	With respect to your references 1 through 7 on page 7 of your report, did you independently provide these references, or were these given to you by somebody?  A. Oh, no. I provided them.  Q. Okay. Do you know any of the authors that you cite in this report?
10:27:37 <b>2</b> 10:27:38 <b>3</b> 10:27:39 <b>4</b> 10:27:41 <b>5</b> 10:27:43 <b>6</b> 10:27:43 <b>7</b> 10:27:47 <b>8</b>	A. Yes. Q. And by the way, A. But I don't I know I know Q she can't give you any answers. A. No, I know. I'm trying to remember the name of the author. I'm sorry. I believe it's on my statement. I believe I referred that to that article in my statement.	10.29.55	With respect to your references 1 through 7 on page 7 of your report, did you independently provide these references, or were these given to you by somebody?  A. Oh, no. I provided them.  Q. Okay. Do you know any of the authors that you cite in this report?  A. I do not.
10:27:37 <b>2</b> 10:27:38 <b>3</b> 10:27:39 <b>4</b> 10:27:41 <b>5</b> 10:27:43 <b>6</b> 10:27:43 <b>7</b> 10:27:47 <b>8</b> 10:27:56 <b>9</b>	A. Yes. Q. And by the way, A. But I don't I know I know Q she can't give you any answers. A. No, I know. I'm trying to remember the name of the author. I'm sorry. I believe it's on my statement. I believe I referred that to that article in my statement. MR. ASSAAD: Let's mark this as Exhibit 1.	10.29.55	With respect to your references 1 through 7 on page 7 of your report, did you independently provide these references, or were these given to you by somebody?  A. Oh, no. I provided them. Q. Okay. Do you know any of the authors that you cite in this report? A. I do not. Q. Okay. What reference are you referring to
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	CONFIDENTIAL - SUBJECT TO PROTECT	VE ORDER 1. 828-2	Filed 09/12/17 Page 7 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	CONTIDENTIAL - SUBSECT TO TROTECT	25	27
	<b>A.</b> It's		
10:31:19		10:32:57	particles. How would particles affect air quality?
10:31:21 2	Depending on the facility and the	10:32:59 2	MS. LEWIS: Objection to the form of the
10:31:22	classification. There are some classifications		question and foundation. And again if I mean,
10:31:26	put the two together, and some that separate		you're asking her to guess on what the article said,
10:31:30 <b>5</b>	don't know which one he used without looking	_	so unless if you don't have a copy of the article
10:31:32 6	article.	10:33:11 6	<del></del>
10:31:33 7	<b>Q.</b> And I take it you've read all these	10:33:11 7	MR. ASSAAD: I'm not asking her to guess.
10:31:35	articles; correct?	10:33:12 8	She's the one that cited it. I assume as an expert
10:31:36	<b>A.</b> Yes.	10:33:15	in this case that's going to offer opinions and you
10:31:36 10	<b>Q.</b> All right.	10:33:17 10	refer to an article, you actually know what the
10:31:36 11	<b>A.</b> Yes.	10:33:19 11	article states.
10:31:36 12	Q. Like from beginning to end, not just	the 10:33:20 <b>12</b>	MS. LEWIS: Well no, this is not a memory
10:31:38 13	abstract.	10:33:22 13	game, Gabe.
10:31:39 14	<b>A.</b> Yes,	10:33:22 14	BY MR. ASSAAD:
10:31:39 15	<b>Q</b> . Okay.	10:33:23 15	<b>Q.</b> Do you know what the article states, ma'am?
10:31:39 16	<b>A.</b> from beginning to end.	10:33:25 16	A. Not without looking at it again.
10:31:40 17	Q. And it says something about "descri	ption 10:33:26 <b>17</b>	Q. Okay. So sitting here today you don't know
10:31:42 18	study on air quality." What does air quality h	ave to 10:33:28 <b>18</b>	what the article states.
10:31:44 19	do with traffic flow?	10:33:29 19	A. Not looking at it again today.
10:31:48 20	A. I'd have to go back and look at the	study, 10:33:31 <b>20</b>	<b>Q.</b> Let's look what you used for number 2.
10:31:53 21	whether he was measuring particles or currer		<b>A.</b> Okay.
10:31:58 22	don't remember.	10:33:33 <b>22</b>	Q. Let's look where it states that you cite to
10:32:00 23	Q. Well assume he was measuring part		number 2. If you look at page 3 it says: According
10:32:02 <b>24</b>	do particles have to do with air quality?	10:33:47 <b>24</b>	to published literature, increased 'door openings'
10:32:05 <b>25</b>	MS. LEWIS: Do you want to show h		causes more air current into the operating room and
10.02.00	STIREWALT & ASSOCIATES	10.505.50	STIREWALT & ASSOCIATES
	1-800-553-1953 info@stirewalt.com		1-800-553-1953 info@stirewalt.com
			1 000 000 1000 Illio@othewalt.com
			CONFIDENTIAL SUBJECT TO PROTECTIVE ORDER
	CONFIDENTIAL - SUBJECT TO PROTECT		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
		26	28
10:32:06 1	article so she can look to see?	26 10:33:52 <b>1</b>	28 increase the risk to the patient of a potential for a
10:32:08 2	article so she can look to see?  MR. ASSAAD: I don't have it.	26 10:33:52 <b>1</b> 10:33:56 <b>2</b>	28 increase the risk to the patient of a potential for a surgical site infection."
10:32:08 <b>2</b> 10:32:11 <b>3</b>	article so she can look to see?  MR. ASSAAD: I don't have it.  A. Okay. Ask your question again. I'n	26   10:33:52   <b>1</b>   10:33:56   <b>2</b>   10:33:56   <b>3</b>	increase the risk to the patient of a potential for a surgical site infection."  Did I read that correctly?
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	CC	CASE 0:15-md-02666-JNE-DTS DOM DNFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 29	<del>. 828-2</del>	Filed C	9/12/17 Page 8 of 23 NFIDENTIAL - SUBJECT TO PROTECTIVE ORDE 31
10:35:10	A.	No.	10:37:33 1	risk of a	surgical-site infection; correct?
0:35:11 2	Q.	You don't consider yourself an expert in	10:37:36 2		MS. LEWIS: Objection to the form.
0:35:13	orthope	·	10:37:38 3	A.	The traffic
0:35:13	À.	No.	10:37:39 4		MR. ASSAAD: Basis? Basis?
0:35:14 <b>5</b>	Q.	You don't consider yourself an expert in	10:37:41 <b>5</b>		MS. LEWIS: Foundation.
:35:16	anesthe		10:37:42 6		MR. ASSAAD: Okay.
0:35:17	_	That's correct.	10:37:44 7	Α.	The traffic increases the door openings and
0:35:17		You don't consider yourself an expert in	10:37:47		That's my statement.
0:35:22		ventilation?	10:37:51 9	_	Okay. Do you know whether or not, sitting
0:35:24 10	Α.	No.	10:37:52 10		ay, that the the number of people in an
0:35:24 11	Q.	You don't consider yourself an expert in	10:37:56 11		g room can affect the risk of a surgical-site
0:35:26 12	aerobiol		10:38:00 12	-	in total hip or total knee arthroplasty?
0:35:28 13		No. Whatever that is.	10:38:03 13		MS. LEWIS: Same objection.
:35:29 14		You don't consider yourself an expert in	10:38:03 14	Α.	No.
0:35:32 15		g room design?	10:38:04 15	Q.	Okay.
:35:34 16	<b>A.</b>	No.	10:38:04 16	Α.	I do not.
1:35:34 10		Okay. You don't consider yourself an expert	10:38:04 10		Is there something about a prosthesis such
:35:35 17	in micro		10:38:37 17		I hip or total knee that the opening of the
:35:39 19	Α.	That's correct.	10:38:47 19	_	reases the risk of surgical-site infection?
:35:43 20	Q. A.	Have you ever designed a medical device? No.	10:38:51 20	A.	Again
:35:45 21			10:38:51 21	٨	MS. LEWIS: Same objection.
:35:46 22		So you don't consider yourself an expert in	10:38:52 22		disturbance to the positive airflow in
:35:48 23		gn of medical devices; correct?	10:38:56 23	the room	
:35:49 24		Correct.	10:38:56 24	_	What does that mean? I mean, so what?
1:35:49 <b>25</b>	Q.	You don't consider yourself an expert with	10:39:00 <b>25</b>	A.	That's what the literature has shown that
		STIREWALT & ASSOCIATES			STIREWALT & ASSOCIATES
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	CC	ONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER		CO	NFIDENTIAL - SUBJECT TO PROTECTIVE ORDE
		30			32
:35:52		to FDA clearance; correct?	10:39:03		n there is a disturbance to that, there is an
:35:53 2	Α.	No.	10:39:06 2	_	d potential risk for surgical-site infection.
1:35:55 3	Q.	Correct; right?	10:39:09	Q.	Do you know what causes surgical-site
1:35:56 4	Α.	That is correct. I am not an expert on FDA	10:39:11 4		<b>う</b>
		mat is correct. I am not an expert on TDA	10.00.11	infection	
:35:58 <b>5</b>	clearanc	re.	10:39:12 5	A.	A variety of factors, most often,
	Q.	re. You mentioned that, you know, surgeries such	_	<b>A.</b> unfortun	A variety of factors, most often, ately, the patient.
36:35 6	<b>Q.</b> as herni	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that	10:39:12 5	<b>A.</b> unfortun	A variety of factors, most often, ately, the patient. Okay. And your basis?
:36:35 6	<b>Q.</b> as herni the oper	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the	10:39:12 <b>5</b> 10:39:17 <b>6</b>	<b>A.</b> unfortun	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading.
0:36:35 <b>6</b> 0:36:37 <b>7</b> 0:36:47 <b>8</b>	<b>Q.</b> as herni the oper risk of s	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?	10:39:12 <b>5</b> 10:39:17 <b>6</b> 10:39:18 <b>7</b>	A. unfortun Q.	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's
:36:35 <b>6</b> :36:37 <b>7</b> :36:47 <b>8</b> :36:55 <b>9</b>	<b>Q.</b> as herni the oper risk of s	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the	10:39:12 <b>5</b> 10:39:17 <b>6</b> 10:39:18 <b>7</b> 10:39:21 <b>8</b>	A. unfortun Q. A.	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading.
36:35 <b>6</b> 36:36:37 <b>7</b> 36:47 <b>8</b> 36:55 <b>9</b> 36:57 <b>10</b>	<b>Q.</b> as herni the oper risk of s	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?	10:39:12 <b>5</b> 10:39:17 <b>6</b> 10:39:18 <b>7</b> 10:39:21 <b>8</b> 10:39:22 <b>9</b>	A. unfortun Q. A. Q.	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's
0:36:35 6 0:36:37 7 0:36:47 8 0:36:55 9 0:36:57 10	<b>Q.</b> as herni the oper risk of s	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the	10:39:12 <b>5</b> 10:39:17 <b>6</b> 10:39:18 <b>7</b> 10:39:21 <b>8</b> 10:39:22 <b>9</b> 10:39:22 <b>10</b>	A. unfortun Q. A. Q.	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my
36:35 6 36:37 7 36:47 8 36:55 9 36:57 10 36:59 11	Q. as herni the oper risk of s	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the	10:39:12 <b>5</b> 10:39:17 <b>6</b> 10:39:18 <b>7</b> 10:39:21 <b>8</b> 10:39:22 <b>9</b> 10:39:22 <b>10</b> 10:39:24 <b>11</b>	A. unfortun Q. A. Q. A. knowled	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my
36:35 6 36:37 7 36:47 8 36:55 9 36:57 10 36:59 11 37:00 12	Q. as herni the oper risk of s A. question	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the	10:39:12	A. unfortun Q. A. Q. knowled	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my ge
6:36:35 6 6:36:37 7 6:36:47 8 6:36:55 9 6:36:57 10 6:36:59 11 6:37:00 12 6:37:00 13 6:37:04 14	Q. as herni the oper risk of s A. question A.	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the	10:39:12	A. unfortun Q. A. Q. A. knowled Q. A.	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my ge Okay.
0:36:35 6 7:36:37 7 8:36:47 8 9:36:55 9 9:36:57 10 0:36:59 11 0:37:00 12 0:37:00 13	Q. as herni the oper risk of s A. question A. that	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the n.  I didn't say it increased No. State	10:39:12	A. unfortun Q. A. Q. A. knowled Q. A. Q.	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my ge Okay as a practicing nurse.
0:36:35 6 0:36:37 7 0:36:47 8 0:36:55 9 0:36:57 10 0:36:59 11 0:37:00 12 0:37:00 13 0:37:04 15 0:37:04 15	Q. as herni the oper risk of s A. question A. that Q. A.	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the n.  I didn't say it increased No. State  Maybe I misunderstood you.	10:39:12 5 10:39:17 6 10:39:21 8 10:39:22 9 10:39:22 10 10:39:24 11 10:39:26 12 10:39:29 13 10:39:29 14 10:39:31 15	A. unfortun Q. A. Q. A. knowled Q. A. Q.	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my ge Okay as a practicing nurse. Okay. But your knowledge is not based on ecation in infectious diseases or anything like
36:35 6 36:37 7 36:47 8 36:55 9 36:57 10 36:59 11 37:00 12 37:00 13 37:04 14 37:04 15 37:05 16	Q. as herni the oper risk of s A. question A. that Q. A.	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the n.  I didn't say it increased No. State  Maybe I misunderstood you. Yeah. So what is it about those surgeries that are	10:39:12	A. unfortun Q. A. Q. A. knowled Q. A. Q. your eduthat; is i	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my ge Okay as a practicing nurse. Okay. But your knowledge is not based on ecation in infectious diseases or anything like
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336:35 6 336:37 7 336:47 8 336:55 9 336:57 10 336:59 11 337:00 12 337:04 15 337:04 15 337:04 15 337:05 16 337:06 17 337:08 18 337:08 19 337:10 20	Q. as herni the oper risk of s A. question A. that Q. A. Q. significa A. same as	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that ning of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the n.  I didn't say it increased No. State  Maybe I misunderstood you. Yeah. So what is it about those surgeries that are nt? In some facilities they are treated as the	10:39:12	A. unfortun Q. A. Q. A. knowled Q. A. Q. your eduthat; is i A. Q. expert w	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my ge Okay as a practicing nurse. Okay. But your knowledge is not based on ecation in infectious diseases or anything like to the second secon
336:35 6 336:37 7 336:47 8 336:55 9 336:57 10 336:59 11 337:00 12 337:00 13 337:04 15 337:05 16 337:06 17 337:08 18 337:08 19 337:10 20 337:10 20 337:11 21	Q. as herni the oper risk of s A. question A. that Q. A. Q. significa A. same as staff wo	You mentioned that, you know, surgeries such a prosthesis or breast implant surgeries, that hing of doors and traffic could increase the urgical-site infection; correct?  In some facili MS. LEWIS: Objection to the form of the h.  I didn't say it increased No. State  Maybe I misunderstood you. Yeah. So what is it about those surgeries that are ht? In some facilities they are treated as the sa total joint and work the facility and the	10:39:12	A. unfortun Q. A. Q. A. knowled Q. A. Q. your eduthat; is i A. Q. expert winfection	A variety of factors, most often, ately, the patient. Okay. And your basis? Literature reading. What's What are you citing to? I'm not citing anything. This is from my ge Okay as a practicing nurse. Okay. But your knowledge is not based on exaction in infectious diseases or anything like t? No. And you would defer to an infectious disease with respect to what causes a surgical-site
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	CASE 0:15 md 02666 INF DTS Dog	020 2	Filed 00/12/17   Dogo 0 of 22
	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	. 020-2	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	65		67
11:20:30 1	room table as compared to letting them below the	11:23:08	A. I don't know that I can answer with a
11:20:33 <b>2</b>	operating room table?	11:23:10 2	citation.
11:20:33 3	<b>A.</b> Are you talking about those who are scrubbed	11:23:11 3	<b>Q.</b> Okay.
11:20:35 4	at the surgical field?	11:23:11 4	<b>A.</b> The air in the room is not sterile. I can
11:20:36 <b>5</b>	<b>Q.</b> Yes.	11:23:15 <b>5</b>	honestly say that. It is not sterile.
11:20:37 6	<b>A.</b> They are instructed to keep them in front of	11:23:18 6	Q. And what's your basis?
11:20:38 7	them so that they can see them at all times.	11:23:20 7	A. My basis of microbiology and sterilization
11:20:41 8	<b>Q.</b> Are they allowed to put them down below the	11:23:24	properties.
11:20:43	operating room table?	11:23:24	Q. What class or what lecture have you taken in
11:20:44 10	A. If it's a low	11:23:27 10	the microbiology with respect to microbiology that
11:20:45 11	If it's a sitting case, yes, but otherwise	11:23:31 11	discusses the unidirectional airflow in an op
11:20:47 12	not usually.	11:23:33 12	A. Nothing.
11:20:48 13	Q. Okay. Say in a total hip or total knee, are	11:23:35 13	Q. Okay.
11:20:49 14	they allowed to put their arms underneath the	11:23:35 14	A. Nothing.
11:20:52 15	operating room table?	11:23:35 15	Q. What citation are you referring to that
11:20:53 16	<b>A.</b> Under the table?	11:23:37 16	could support that statement, sitting here today?
11:20:53 17	Q. Or below the operating room table?	11:23:37 17	<b>A.</b> Probably a basic course on sterilization.
11:20:54 17	A. It's not below the table, it's below where	11:23:39 17	
		11:23:41 10	
11:20:58 <b>19</b> 11:21:01 <b>20</b>	the where they are in relation to the table, so they don't want to be below the table.	11:23:43 19	<ul><li>A. I cannot spit out a citation for you today.</li><li>Q. Okay. Do you know whether or not the air is</li></ul>
	• -		
11:21:03 21	Q. Why not?	11:23:57 <b>21</b> 11:23:59 <b>22</b>	filtered coming out of the ventilation?
11:21:04 22	<b>A.</b> Because, again, they may inadvertently touch		A. I'm not an engineer, but I understand it is.
11:21:08 23	something that was not sterile like they were.	11:24:01 23	Q. Do you know what level filtration?
11:21:10 24	Q. Okay. But what if they don't touch	11:24:02 24	A. I do not.
11:21:12 25	anything, is it still okay to put your hands	11:24:11 <b>25</b>	Q. You write down, like four, five lines up
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	66		68
11:21:14	underneath the operating room table?	11:24:14 1	from that: "The air is filtered and the
11:21:15 2	<b>A.</b> The recommendation is to keep them in front	11:24:16 2	unidirectional downward air flow is strong."
11:21:17 3	of you at all times.	11:24:18 3	What do you mean by the term "strong"?
11:21:17 4	<b>Q.</b> Why is that the recommendation?	11:24:20 4	<b>A.</b> That means when you're standing next to the
11:21:19 5	<b>A.</b> So, again, you are not inadvertently	11:24:22 <b>5</b>	patient at the surgical site you can feel the airflow
11:21:21 6	contaminating yourself.	11:24:24 6	on the back of your neck.
11:21:22 7	<b>Q.</b> So sitting here today you have no opinion as	11:24:26 7	
11:21:26	to whether Strike that. Strike that.		Q. Okay. So that to you is "strong."
	to whether Strike that. Strike that.	11:24:29 8	A. Yes.
11:21:29 9	You do understand that the airflow in the	11:24:29 <b>8</b> 11:24:30 <b>9</b>	_
11:21:29 <b>9</b> 11:22:11 <b>10</b>			A. Yes.
_	You do understand that the airflow in the	11:24:30 9	<ul><li>A. Yes.</li><li>Q. Okay.</li></ul>
11:22:11 10	You do understand that the airflow in the operating room is pushing all the contaminants down to	11:24:30 <b>9</b> 11:24:30 <b>10</b>	<ul><li>A. Yes.</li><li>Q. Okay.</li><li>A. That's my words and my description.</li></ul>
11:22:11 <b>10</b> 11:22:15 <b>11</b>	You do understand that the airflow in the operating room is pushing all the contaminants down to the floor and then out of out to the output vents	11:24:30 <b>9</b> 11:24:30 <b>10</b> 11:24:32 <b>11</b>	<ul><li>A. Yes.</li><li>Q. Okay.</li><li>A. That's my words and my description.</li><li>Q. And I take it if I ask you what the velocity</li></ul>
11:22:11 <b>10</b> 11:22:15 <b>11</b> 11:22:18 <b>12</b>	You do understand that the airflow in the operating room is pushing all the contaminants down to the floor and then out of out to the output vents in the operating room.	11:24:30 <b>9</b> 11:24:30 <b>10</b> 11:24:32 <b>11</b> 11:24:34 <b>12</b>	<ul> <li>A. Yes.</li> <li>Q. Okay.</li> <li>A. That's my words and my description.</li> <li>Q. And I take it if I ask you what the velocity of the air, you would not know what the answer is;</li> </ul>
11:22:11 <b>10</b> 11:22:15 <b>11</b> 11:22:18 <b>12</b> 11:22:19 <b>13</b>	You do understand that the airflow in the operating room is pushing all the contaminants down to the floor and then out of out to the output vents in the operating room.  A. I don't know if	11:24:30 9 11:24:30 10 11:24:32 11 11:24:34 12 11:24:37 13	<ul> <li>A. Yes.</li> <li>Q. Okay.</li> <li>A. That's my words and my description.</li> <li>Q. And I take it if I ask you what the velocity of the air, you would not know what the answer is; correct?</li> </ul>
11:22:11	You do understand that the airflow in the operating room is pushing all the contaminants down to the floor and then out of out to the output vents in the operating room.  A. I don't know if MS. LEWIS: Objection, form.	11:24:30 9 11:24:30 10 11:24:32 11 11:24:34 12 11:24:37 13 11:24:37 14	<ul> <li>A. Yes.</li> <li>Q. Okay.</li> <li>A. That's my words and my description.</li> <li>Q. And I take it if I ask you what the velocity of the air, you would not know what the answer is; correct?</li> <li>A. That's correct.</li> </ul>
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11:22:11 10 11:22:15 11 11:22:19 13 11:22:20 14 11:22:25 16 11:22:25 17 11:22:47 18 11:22:50 19 11:22:55 20 11:22:58 21 11:23:00 22	You do understand that the airflow in the operating room is pushing all the contaminants down to the floor and then out of out to the output vents in the operating room.  A. I don't know if MS. LEWIS: Objection, form.  A it's pushing contaminants. I know the direction of the flow. I can't answer whether or not it's pushing anything besides the flow.  Q. You write on page 2, under introduction to operating room environment, last sentence: "Although the unidirectional air is filtered, it is not considered sterile, and is not sterile over the operating room bed."	11:24:30 9 11:24:30 10 11:24:32 11 11:24:37 13 11:24:37 14 11:24:38 15 11:24:44 16 11:24:47 17 11:24:49 18 11:24:51 19 11:24:53 20 11:24:59 21 11:25:00 22	<ul> <li>A. Yes.</li> <li>Q. Okay.</li> <li>A. That's my words and my description.</li> <li>Q. And I take it if I ask you what the velocity of the air, you would not know what the answer is; correct?</li> <li>A. That's correct.</li> <li>Q. Okay. Are you When you participate in a total hip or total knee are you the scrub nurse?</li> <li>A. I can function as either the scrub nurse or the circulating nurse.</li> <li>Q. Okay. Does the Bair Hugger work, in your opinion?</li> <li>A. Yes. It keeps the patient at a good</li> </ul>
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11:22:11 10 11:22:15 11 11:22:18 12 11:22:19 13 11:22:20 14 11:22:25 16 11:22:25 17 11:22:47 18 11:22:50 19 11:22:50 20 11:22:50 21 11:23:00 22 11:23:01 23 11:23:04 24	You do understand that the airflow in the operating room is pushing all the contaminants down to the floor and then out of out to the output vents in the operating room.  A. I don't know if  MS. LEWIS: Objection, form.  A it's pushing contaminants. I know the direction of the flow. I can't answer whether or not it's pushing anything besides the flow.  Q. You write on page 2, under introduction to operating room environment, last sentence: "Although the unidirectional air is filtered, it is not considered sterile, and is not sterile over the operating room bed."  What is your basis behind that? What are you What citation are you referring to in your	11:24:30 9 11:24:30 10 11:24:32 11 11:24:34 12 11:24:37 13 11:24:37 14 11:24:38 15 11:24:41 16 11:24:41 17 11:24:49 18 11:24:51 19 11:24:51 20 11:24:52 21 11:25:02 23 11:25:03 24	<ul> <li>A. Yes.</li> <li>Q. Okay.</li> <li>A. That's my words and my description.</li> <li>Q. And I take it if I ask you what the velocity of the air, you would not know what the answer is; correct?</li> <li>A. That's correct.</li> <li>Q. Okay. Are you  When you participate in a total hip or total knee are you the scrub nurse?</li> <li>A. I can function as either the scrub nurse or the circulating nurse.</li> <li>Q. Okay. Does the Bair Hugger work, in your opinion?</li> <li>A. Yes. It keeps the patient at a good normothermia temperature.</li> <li>Q. So you think the Bair Hugger is effective in</li> </ul>
11:22:11 10 11:22:15 11 11:22:18 12 11:22:19 13 11:22:20 14 11:22:25 16 11:22:25 17 11:22:47 18 11:22:50 19 11:22:50 20 11:22:58 21 11:23:00 22 11:23:01 23 11:23:04 24	You do understand that the airflow in the operating room is pushing all the contaminants down to the floor and then out of out to the output vents in the operating room.  A. I don't know if MS. LEWIS: Objection, form.  A it's pushing contaminants. I know the direction of the flow. I can't answer whether or not it's pushing anything besides the flow.  Q. You write on page 2, under introduction to operating room environment, last sentence: "Although the unidirectional air is filtered, it is not considered sterile, and is not sterile over the operating room bed."  What is your basis behind that? What are you What citation are you referring to in your citations to support that statement?	11:24:30 9 11:24:30 10 11:24:32 11 11:24:34 12 11:24:37 13 11:24:37 14 11:24:38 15 11:24:41 16 11:24:41 17 11:24:49 18 11:24:51 19 11:24:51 20 11:24:52 21 11:25:02 23 11:25:03 24	<ul> <li>A. Yes.</li> <li>Q. Okay.</li> <li>A. That's my words and my description.</li> <li>Q. And I take it if I ask you what the velocity of the air, you would not know what the answer is; correct?</li> <li>A. That's correct.</li> <li>Q. Okay. Are you When you participate in a total hip or total knee are you the scrub nurse?</li> <li>A. I can function as either the scrub nurse or the circulating nurse.</li> <li>Q. Okay. Does the Bair Hugger work, in your opinion?</li> <li>A. Yes. It keeps the patient at a good normothermia temperature.</li> <li>Q. So you think the Bair Hugger is effective in the first hour of surgery?</li> </ul>

	CASE 0:15-md-02666-JNE-DTS Do CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>?, 828-2</del>	Filed 09/12/17 Page 10 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	73	•	75
11:30:32	difference between a periprosthetic joint infection	11:33:15 <b>1</b>	<b>A.</b> I don't get that question. I'm sorry. I'm
11:30:34 <b>2</b>	and a superficial wound infection; correct?	11:33:18 2	not following that question.
11:30:36	A. Correct.	11:33:19 3	Q. You do understand to cause a infection you
11:30:37 4	Q. Okay. And if I asked you the amount of	11:33:22 4	need bacteria; correct?
11:30:47 <b>5</b>	Do you know what a CFU is?	11:33:23 5	A. Correct.
11:30:50 6	A. I've forgotten.	11:33:23 6	Q. And bacteria needs to be transferred to
7	Q. Okay. So sitting here today, you don't know	_	for example, if it's an implant infection, onto the
11:30:52	what a CFU is; correct?	11:33:27 /	implant; correct?
11:30:54 <b>8</b>	A. No.		
		11:33:32 9	<ul><li>A. Potentially, yes. Correct.</li><li>Q. Okay. And you want to place measures to</li></ul>
11:30:57 10	, , , , , , , , , , , , , , , , , , , ,		
11:31:09 11	know the mechanism of causing an infection with	11:33:39 11	limit the chances of any bacteria getting onto that
11:31:13 12	respect to a periprosthetic joint infection; correct?	11:33:43 12	implant.
11:31:15 13	A. Correct.	11:33:44 13	A. Correct.
11:31:16 14	Q. Okay. You agree with me that you want to	11:33:45 14	Q. Okay. That means you want to place measures
11:31:33 15	keep the operating room as sterile as possible;	11:33:50 15	to limit the amount of contaminants that could get
11:31:36 16	correct?	11:33:56 16	onto the surgical gloves of the surgeon; correct?
11:31:37 17	<b>A.</b> The operating room is not sterile.	11:33:59 17	<b>A.</b> What do you mean by "place measures"?
11:31:40 18	<b>Q.</b> Let me rephrase that.	11:34:01 18	<b>Q.</b> Like, you want to you want to keep the
11:31:41 19	You want to keep the area the surgical	11:34:04 19	area as clean as possible.
11:31:43 <b>20</b>	site as sterile as possible.	11:34:05 <b>20</b>	A. Sterile.
11:31:47 <b>21</b>	<b>A.</b> No. I would not agree with that statement.	11:34:06 <b>21</b>	<b>Q.</b> Sterile.
11:31:50 <b>22</b>	Q. Okay. Do you want to place measures to keep	11:34:08 <b>22</b>	<b>A.</b> So ask the question again.
11:31:57 23	as much of the contaminants out of the surgical site?	11:34:11 23	Q. Have you heard of the term "a sterile
11:32:01 <b>24</b>	A. Yes.	11:34:12 24	field"?
11:32:02 <b>25</b>	Q. And you also want to keep you want to	11:34:12 <b>25</b>	A. Yes.
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	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
_	74		76
11:32:05	place measures that would keep contaminants out of the	11:34:13	<b>Q.</b> Okay. But it's your opinion that a sterile
11:32:13 2	area in which the surgeon is working; correct?	11:34:15 2	field is not sterile.
11:32:16 3	A. Yes.	11:34:17 3	A. It is as sterile as it can be.
11:32:16 4	<b>Q.</b> Keep contaminants out of the area of the	11:34:19 4	<b>Q.</b> Okay. And there's many procedures and rules
11:32:19 <b>5</b>	surgeon's hands or anyone's hands that are going to	11:34:24 <b>5</b>	and regulations in the operating room to keep the
11:32:22 6	the surgical site; correct?	11:34:27 6	sterile field as sterile as possible.
11:32:22 7	A. Yes.	11:34:29 7	A. Yes.
11:32:23 <b>8</b>	<b>Q.</b> You want to keep contaminants out of the	11:34:30	Q. Okay. And not just the
11:32:25	area where the surgical instruments are being placed.	11:34:32	And the sterile field includes the surgical
11:32:29 10	A. Yes.	11:34:35 10	site?
11:32:29 11	Q. You want to keep the	11:34:35 11	<b>A.</b> Yes.
11:32:31 12	You want to place measures to keep the area	11:34:36 12	Q. Okay. It includes the front of the surgeons
40		11:34:40 13	and the assistants participating in the surgery?
11:32:39 <b>1 3</b>	where the implant is being placed before it's placed	11:34:40	and the assistants participating in the surgery.
	where the implant is being placed before it's placed into the patient, to limit the contaminants that reach	11:34:40 13	A. Yes.
11:32:43 14			
11:32:43 <b>14</b> 11:32:48 <b>15</b>	into the patient, to limit the contaminants that reach	11:34:43 14	A. Yes.
11:32:43	into the patient, to limit the contaminants that reach that area; correct?	11:34:43 <b>14</b> 11:34:43 <b>15</b>	<ul><li>A. Yes.</li><li>Q. It includes the back tables?</li></ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you	11:34:43	<ul><li>A. Yes.</li><li>Q. It includes the back tables?</li><li>A. Yes.</li></ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may contaminate the surgical site; correct?</li> </ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.  There's many ways an implant could be	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may contaminate the surgical site; correct?</li> </ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.  There's many ways an implant could be contaminated; correct?	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may contaminate the surgical site; correct?</li> <li>A. Any inanimate object, is that what you're?</li> </ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.  There's many ways an implant could be contaminated; correct?  A. Yes.	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may contaminate the surgical site; correct?</li> <li>A. Any inanimate object, is that what you're?</li> <li>Q. Yes.</li> <li>A. Yes.</li> </ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.  There's many ways an implant could be contaminated; correct?  A. Yes. Q. Could be by direct contamination if the	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may</li> <li>contaminate the surgical site; correct?</li> <li>A. Any inanimate object, is that what you're?</li> <li>Q. Yes.</li> <li>A. Yes.</li> <li>Q. Okay. And in fact you do there is the</li> </ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.  There's many ways an implant could be contaminated; correct?  A. Yes. Q. Could be by direct contamination if the surgeon's hands are not sterile; correct?	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may contaminate the surgical site; correct?</li> <li>A. Any inanimate object, is that what you're?</li> <li>Q. Yes.</li> <li>A. Yes.</li> <li>Q. Okay. And in fact you do there is the patient prep where you try to make the skin around the</li> </ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.  There's many ways an implant could be contaminated; correct?  A. Yes. Q. Could be by direct contamination if the surgeon's hands are not sterile; correct?  A. His hands	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may contaminate the surgical site; correct?</li> <li>A. Any inanimate object, is that what you're?</li> <li>Q. Yes.</li> <li>A. Yes.</li> <li>Q. Okay. And in fact you do there is the patient prep where you try to make the skin around the patient where the surgical site is as sterile as</li> </ul>
11:32:43	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.  There's many ways an implant could be contaminated; correct?  A. Yes. Q. Could be by direct contamination if the surgeon's hands are not sterile; correct?  A. His hands Q. Where his gloves are, they're not sterile.	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may contaminate the surgical site; correct?</li> <li>A. Any inanimate object, is that what you're?</li> <li>Q. Yes.</li> <li>A. Yes.</li> <li>Q. Okay. And in fact you do there is the patient prep where you try to make the skin around the patient where the surgical site is as sterile as possible, as clean as possible.</li> </ul>
11:32:39 13 11:32:43 14 11:32:48 15 11:32:49 16 11:32:53 18 11:32:53 19 11:33:01 20 11:33:02 21 11:33:04 22 11:33:04 22 11:33:11 24 11:33:11 24	into the patient, to limit the contaminants that reach that area; correct?  A. Yes. Q. Okay. Because there's many ways that you could infect an implant; correct? Strike that.  There's many ways an implant could be contaminated; correct?  A. Yes. Q. Could be by direct contamination if the surgeon's hands are not sterile; correct?  A. His hands	11:34:43	<ul> <li>A. Yes.</li> <li>Q. It includes the back tables?</li> <li>A. Yes.</li> <li>Q. Okay. It includes anything that may contaminate the surgical site; correct?</li> <li>A. Any inanimate object, is that what you're?</li> <li>Q. Yes.</li> <li>A. Yes.</li> <li>Q. Okay. And in fact you do there is the patient prep where you try to make the skin around the patient where the surgical site is as sterile as</li> </ul>

		DIFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 77			NFIDENTIAL - SUBJECT TO PROTECTIVE ORD 79
35:10 <b>1</b>	A.	Clean.	11:37:06 1	patient is	s in surgery.
35:11 2	Q.	Okay.	11:37:11 2		MS. LEWIS: Objection, form.
35:12 3	A.	The skin	11:37:12 3	A.	I don't know that. I don't know that.
35:14 <b>4</b>		We do not sterilize the skin.	11:37:13 4	Q.	Okay. You don't know that. Okay.
35:15 <b>5</b>	Q.	But you have sterile drapes; correct?	11:37:15 <b>5</b>	A.	No.
5:17 6	A.	Yes.	11:37:22 6	Q.	You write down here: "The air handling
55:17 <b>7</b>	Q.	And you isolate the surgical site and you	11:37:26 7	requirem	nent for an operating room is a minimum of 20
5:23 8	put the s	sterile drapes around it; correct?	11:37:28 8	exchang	es an hour, with a minimum of 4 air changes o
5:23 9		(Interruption by the reporter.)	11:37:32 9	outdoor	air."
5:23 10		THE REPORTER: "And you isolate the"?	11:37:33 10	A.	Correct.
5:25 11	Q.	sterile site, and you try to keep the	11:37:34 11	Q.	Where'd you obtain that information?
5:26 12	you try t	to limit the amount of contaminants that could	11:37:35 12	A.	From the AORN recommended practice.
5:28 13	get to th	nat area; correct?	11:37:38 13	Q.	Is that cited?
5:29 14	A.	Yes.	11:37:40 14	A.	I believe it is, the 2017. (Witness
5:30 15	Q.	Okay. For example, you put, like, even for	11:37:40 15	reviewin	g exhibit.)
5:36 16	the over	head lights you put, you know, a covering over	11:37:44 16		No, I didn't put it in there.
5:39 17	the hand	dles so it doesn't potentially contaminate the	11:37:46 17	Q.	Okay.
5:43 18	sterile fi	eld.	11:37:47 18	A.	Sorry.
5:45 19	A.	No.	11:37:47 19	Q.	So there's no reference
5:46 <b>20</b>	Q.	You don't put, like	11:37:48 20	A.	For garments
5:48 <b>21</b>	A.	The cover is used for the surgeon to	11:37:49 <b>21</b>		Yes, I'm sorry, I did. AORN Guideline for
5:50 <b>22</b>	manipula	ate the light, not to cover or sterilize the	11:37:53 <b>22</b>	Safe Env	rironment of Care. Part II is the one with
5:53 <b>23</b>	light.		11:37:54 23	air-hand	ling recommendations.
5:54 <b>24</b>	Q.	Yeah, because you don't want the surgeon to	11:37:56 <b>24</b>	Q.	Okay. But you yourself don't consider
5:55 <b>25</b>	touch th	e light that could be contaminated; correct?	11:38:00 <b>25</b>	you're a	n expert in air handling; correct?
		STIREWALT & ASSOCIATES			STIREWALT & ASSOCIATES
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	CC	ONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER		CC	NFIDENTIAL - SUBJECT TO PROTECTIVE ORD
		78			80
5:58 1	A.	Correct. Yes. Touch an un	11:38:03 <b>1</b>	A.	That's correct.
6:00 <b>2</b>	Q.	The handle.	11:38:06 <b>2</b>	Q.	Okay. You go on and say: "The pressure is
6:01 3	A.	the handle that's unsterile, yes.	11:38:07 <b>3</b>	maintain	ed as positive pressure to the surrounding
6:03 4	Q.	Okay.	11:38:09 4	rooms."	
6:08 <b>5</b>	A.	The light is not covered, though.	11:38:10 <b>5</b>	A.	Correct.
6:11 6	Q.	I understand that.	11:38:10 6	Q.	Do you know what the the difference in
6:11 7	A.	Okay.	11:38:12 7	pressure	is?
6:12 8	Q.	But the light is cleaned; correct?	11:38:14	Α.	The degree, or the
6:14 9	A.	Yes, it is cleaned.	11:38:16 9	Q.	Yeah.
6:27 10	Q.	And in fact on page 2, under "Introduction	11:38:16 10	A.	No.
6:30 11		Operating Room Environment" of Exhibit 1 you	11:38:17 11	Q.	Okay. Do you agree that, on the first line
6:33 12		The operating room environment is one of	11:38:38 12	of unc	ler "The Operating Room Procedures," that
6:35 13		es and regulations put in place to protect	11:38:40 13		al is to provide for each surgical patient a
6:39 14	_	ical patient and the healthcare worker";	11:38:43 14	_	in environment"; correct?
6:42 15	correct?		11:38:44 15	Α.	Yes.
5:42 <b>16</b>	Α.	Correct.	11:38:45 16	Q.	So you want to do everything possible to
6:42 17		Okay. There are many rules and regulations	11:38:46 17	-	lean, safe environment for the patient;
0:42		ct a surgical patient; correct?	11:38:49 18	correct?	
		Correct.	11:38:49 19	Α.	Yes.
5:44 <b>18</b>		And that one of the reasons to protect the	11:38:50 20		You don't want any device in there that
5:44 <b>18</b> 5:48 <b>19</b>	Q.	patient is to try to protect the patient from	11:38:52 21		ssibly cause harm to the patient; correct?
6:44 <b>18</b> 6:48 <b>19</b> 6:48 <b>20</b>		patient is to the for protect the patient indi-		a.a po	, and pasiently confecti
5:44 18 5:48 19 5:48 20 5:50 21	surgical			Δ	Correct.
18 19 19 19 19 19 19 19 19 19 19	surgical obtaining	g a surgical-site infection.	11:38:54 <b>22</b>	A. O	Correct.  And if that device causes harm it should not
6:44 18 6:48 19 6:48 20 6:50 21 6:55 22 6:56 23	surgical obtaining <b>A.</b>	g a surgical-site infection. Yes.	11:38:54 <b>22</b> 11:38:54 <b>23</b>	Q.	And if that device causes harm it should not
6:44 18 6:48 19 6:48 20 6:50 21 6:55 22 6:56 23 6:57 24	surgical obtaining <b>A.</b> <b>Q.</b>	g a surgical-site infection.  Yes.  Okay. And you agree with me that there are	11:38:54 <b>22</b> 11:38:54 <b>23</b> 11:38:56 <b>24</b>	<b>Q</b> . be used	And if that device causes harm it should not in the patient unless it's absolutely
6:44 18 6:48 19 6:48 20 6:50 21 6:55 22 6:56 23 6:57 24 7:03 25	surgical obtaining <b>A.</b> <b>Q.</b>	g a surgical-site infection. Yes.	11:38:54 <b>22</b> 11:38:54 <b>23</b>	<b>Q</b> . be used	And if that device causes harm it should not

	CC	CASE 0:15-md-02666-JNE-DTS Doc NFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>: 828-2</del>	Filed 09	NFIDENTIAL - SUBJECT TO PROTECTIVE ORDE
	•	81			83
:38:59 1		Correct.	11:40:57	correct?	
:39:04 2		And if there are other products that could	11:40:57 2	_	Yes,
39:06 3		ame thing but are safer for the patient, then	11:40:57 3	Q.	Okay.
39:09 4	you sho	uld use that product; correct?	11:40:58 4	Α.	in my experience.
39:11 5		MS. LEWIS: Objection to form.	11:40:59 <b>5</b>	Q.	Okay. Did you do any research to see what
39:12 6	Α.	Say State that one again, I'm	11:41:06 <b>6</b>	has beer	n written about the Bair Hugger and its safety
39:14 7	Q.	Well if there are if there are many ways	11:41:07 7	in the pa	st 10 years?
39:16 8	to warm	a patient, and one is safer than the other,	11:41:08	Α.	No.
39:18 9	you sho	uld use the one that's safer for the patient,	11:41:09	Q.	Okay.
39:21 10	correct,	if they're both as effective?	11:41:12 10	A.	Other than to cite my articles.
39:23 11	A.	I don't	11:41:12 11	Q.	Okay.
39:24 <b>12</b>		MS. LEWIS: Objection to form.	11:41:18 12	A.	That's the reading I've done.
39:25 13	A.	know the answer to that.	11:41:20 13	Q.	So you were asked to be an expert in this
39:26 14		You don't?	11:41:24 14	case; co	
39:26 15	A.	No. I've only used one device, so I don't	11:41:25 15	_	
39:28 16		there are others that are as effective.	11:41:25 16	Q.	Okay. And you got a call from some attorne
39:31 <b>17</b>		Well hypothetically	11:41:29 17	-	guess it was in May of 2017; correct?
39:32 18		You're asking my opinion. That's my	11:41:29 17		Yes.
				_	
19:34	•	I don't know.	11:41:33 19	Q.	Okay.
9:34 20		Hypothetically, if there is a device that is	11:41:34 20		It was Deborah.
9:36 21		the patient and it's just as effective as	11:41:35 21	Q.	Okay. And before you were
9:39 <b>22</b>		Hugger, would you agree with me, as an	11:41:43 <b>22</b>		Did you know you would be receiving a call,
9:43 <b>23</b>		e for the patient, that you should use the	11:41:45 23	-	ir colleagues, regarding the Bair Hugger devi
39:45 <b>24</b>	safer de	vice?	11:41:48 <b>24</b>		litigation?
39:45 <b>25</b>		MS. LEWIS: Objection to form.	11:41:49 <b>25</b>	Α.	No.
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		82			84
39:46 1	Α.	I can't answer that.	11:41:50 <b>1</b>	Q.	Okay. So they didn't tell you that they
39:47 <b>2</b>	Q.	You can't answer that question?	11:41:52 <b>2</b>	referred	you to Deborah Lewis.
9:49 3	Α.	I can't answer that.	11:41:53 <b>3</b>	Α.	One colleague did, yes.
9:49 <b>4</b>	Q.	Why not?	11:41:55 4		Okay.
9:50 5	Α.	The answer would depend on the cost of the	11:41:55 <b>5</b>	A.	She sent me an email saying, I've tossed
9:54 6		the studies that show it's as effective, and	11:41:58 6		ne out there.
10:01 7		of use. There are lots of factors other than	11:41:59 7	-	Okay.
0:03		ng it's as effective.	11:42:00	A.	But did not have any particulars of the
0:06 9		So are you sitting here today that cost may	11:42:03	case.	but did not have any particulars of the
		rtant than patient safety?	11:42:04 10		Okay. And before you
0:08 10	-			ω.	
0:10 11		Huge. Huge.	11:42:12 11	that 214	Let me ask you this: Were there any facts
0:12 12		So you're saying it's more important than	11:42:14 12		provided, or their counsel, that you relied
0:14 13	patient s		11:42:21 13	_	formulating your opinions?
0:15 14		No. I didn't say "more important."	11:42:23 14	Α.	No.
0:16 15		Well that was my question, ma'am.	11:42:24 15		Okay. Did you do any independent research
0:17 16		It Say your question again.	11:42:28 16		mine whether or not the plaintiffs'
0:19 17	Q.	Are you sitting here today saying that cost	11:42:32 17	allegatio	ns were true or false?
0:20 18	is more	important than patient safety?	11:42:33 18	A.	No.
0:22 19	A.	No.	11:42:34 19	Q.	Okay. So my understanding is that you wer
0:23 <b>20</b>	Q.	Okay. Are you saying that the ease of use	11:42:35 <b>20</b>	asked to	offer an expert opinion in this case
0:25 21	of the de	evice is more important than patient safety?	11:42:39 <b>21</b>	regardin	g the safety of the Bair Hugger, and you
0:28 22	Α.	No.	11:42:41 <b>22</b>	_	did not provide any inde perform any
0:29 23		Okay. Patient safety is paramount; correct?	11:42:45 23		dent research.
0:40 24		Yes.	11:42:45 24	асрене	MS. LEWIS: Objection, form. That's not
·U.4U <b>4</b>	Q.	And you think the Bair Hugger is safe;	11:42:46 <b>24</b>	what	1.5. LEVVIS. Objection, form. That's not
2E	IJ.	And you dillik the ball riugger is sale;	11:42:47 43	wildt	
10:56 <b>25</b>	٠.	CTIDEWALT & ACCOUNTED			CTIDE/MALT & ACCOCIATES
40:56 <b>25</b>		STIREWALT & ASSOCIATES I-800-553-1953 info@stirewalt.com			STIREWALT & ASSOCIATES -800-553-1953 info@stirewalt.com

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11:42:47	MR. ASSAAD: Basis?	11:44:48 1	Hugger is safe?
11:42:48 <b>2</b>	MS. LEWIS: That's not what's in her	11:44:54 <b>2</b>	A. My practice is I'm very interested in making
11:42:50 <b>3</b>	report.	11:44:57 <b>3</b>	sure the patients are safe. If there was any
11:42:51 4	A. I was asked to testify as to the flow of the	11:45:00 <b>4</b>	literature, or recalls, or concerns that any device
11:42:54 <b>5</b>	patient in the OR environment, not to conduct	11:45:04 <b>5</b>	was not safe to be used on patients, I would not use
11:42:58 6	independent research.	11:45:07 6	it in my practice.
11:42:59 7	Q. You were asked to testify to what? I'm	11:45:11 7	MR. ASSAAD: Move to strike, nonresponsive.
11:43:01 8	sorry.	11:45:12	Q. What have you done?
11:43:02 9	A. To the flow and of the patient in the	11:45:14 9	A. I have not done any independent research.
11:43:04 10	operating room.	11:45:15 10	Q. Okay. Have you done any biological testing?
11:43:05 11	Q. When you say "the flow of the patient,"	11:45:17 11	<b>A.</b> No.
11:43:07 12	what, the airflow?	11:45:18 12	Q. Have you done any filtration testing?
11:43:08 13	<b>A.</b> No, the flow, the the description of what	11:45:21 13	A. No.
11:43:11 14	happens to the patient in the operating room.	11:45:21 14	Q. Have you looked at particle counts in an
11:43:13 15	<b>Q.</b> Okay. So sitting here today, you have done no research or looked at the issues in this case to	11:45:23 <b>15</b> 11:45:23 <b>16</b>	operating room? <b>A.</b> No.
11:43:17 <b>16</b> 11:43:20 <b>17</b>	determine, as a as a scientist, whether or not the	11:45:23 16	Q. Okay. In fact you have not done any type of
11:43:20 17	Bair Hugger is safe.	11:45:24 17	testing with respect to the Bair Hugger; correct?
11:43:28 19	<b>A.</b> No, I would answer that, no, I have.	11:45:30 19	A. Correct.
11:43:30 20	Q. What research have you done?	11:45:31 20	Q. Okay. So again, besides your I mean, did
11:43:32 21	<b>A.</b> I have not done independent research, if	11:45:39 21	you have any With re Strike that.
11:43:34 22	that's what you're asking. No, I have not done any	11:45:41 <b>22</b>	With respect to determining, outside reading
11:43:36 23	independent research. I have done reading.	11:45:43 23	those two articles, that the Bair Hugger is safe, what
11:43:39 24	Q. Okay. What reading have you done besides	11:45:46 <b>24</b>	methodology did you use?
11:43:40 <b>25</b>	what's in here?	11:45:49 <b>25</b>	A. None.
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	A This is substituting and		88
11:43:41 1	A. This is what I've read.	11:45:59 1	<ul><li>Q. Have you looked at the McGovern study?</li><li>A. No.</li></ul>
11:43:42 <b>2</b> 11:43:56 <b>3</b>	<b>Q.</b> Okay. So you've read two articles on page 7, items number 6 and 7, with respect to forced-air	11:46:02 <b>2</b> 11:46:02 <b>3</b>	Q. Have you looked at any of the Legg studies?
11:44:02 4	warming devices?	11:46:06 4	A. Is it
11:44:04 <b>5</b>	A. Yes.	11:46:07 5	<b>Q</b> . Legg, L-E-G-G.
11:44:05 6	Q. Okay. So your sitting here today it is	11:46:08 6	<b>A.</b> No.
11:44:10 7	your it's my understanding that your basis for	11:46:09 7	Q. Have you looked at any of
11:44:14 8	whether or not the Bair Hugger is safe is based on	11:46:12 8	Have you looked at the Dasari study?
11:44:18 9	references numbers 6 and 7 to your report.	11:46:15 9	<b>A.</b> No.
11:44:20 10	<b>A.</b> And my	11:46:15 10	<b>Q.</b> Have you looked at the Belani study?
11:44:21 11	And my expertise as a nurse.	11:46:18 11	<b>A.</b> No.
11:44:23 12	Q. Well your expertise as a nurse did not	11:46:18 12	Q. Have you looked at the Harper study?
11:44:25 13	involve any research with respect to the Bair Hugger	11:46:20 13	A. No.
11:44:27 14	safety; has it?	11:46:21 14	Q. Have those studies been provided to you by
11:44:28 15	A. That's correct.	11:46:23 15	the defendants in this case?
11:44:29 16	<b>Q.</b> Okay. So your expertise as a as a nurse	11:46:25 16	A. I don't remember that they have. I do not
11:44:32 17	has nothing to do with your opinion with respect to	11:46:28 17	No. No.
11:44:35 18	the safety of the Bair Hugger.	11:46:29 18	Q. Because if they were listed it would be in
11:44:37 <b>19</b> 11:44:38 <b>20</b>	<ul><li>A. I disagree.</li><li>Q. Okay. What research have you done in the</li></ul>	11:46:30 <b>19</b> 11:46:31 <b>20</b>	your report; correct?  A. Correct.
11:44:38 <b>20</b> 11:44:40 <b>21</b>	past	11:46:31 <b>20</b> 11:46:32 <b>21</b>	Q. Okay. You stated that you that as an
11:44:40 21	<b>A.</b> I have not done research.	11:46:32 21	expert you were to be objective; correct?
11:44:41 23	Q. Okay. What	11:47:10 23	A. Correct.
11:44:42 24	What is it about being a nurse that you've	11:47:11 24	Q. Do you think it's being objective by not
11:44:44 25	done, and have done anything, to determine the Bair	11:47:12 <b>25</b>	looking at the studies that the plaintiffs rely upon
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11:52:38 <b>1</b>	93 <b>A.</b> Efficient, again, in that in measuring	11:55:14 <b>1</b>	95 <b>Q.</b> There's no methodology behind that opinion.
11:52:38	pre-op temperature and post-op temperature it is able	11:55:14	A. That's correct.
11:52:40 <b>2</b>	to maintain their normal body temperature	11:55:16 2	Q. Okay. You mention about five lines up:
11:52:45 4	Q. Okay.	11:55:22 4	"The Bair Hugger may be on an IV pole also used by
11:52:46 <b>5</b>	A or keep them at a normal body	11:55:26 <b>5</b>	anesthesia, or on a rolling cart."
11:52:48 6	temperature.	11:55:28 6	Did I read that correctly?
-	Q. So basically you're saying that the Bair	11:55:28 7	A. Yes.
•	Hugger performs its job. You're not saying it's	11:55:29	Q. Have you ever seen the Bair Hugger just
^	efficient at doing its job.	11:55:30	sitting on the floor?
11:52:55 9	<b>A.</b> It's performed to what it	11:55:31 10	A. No.
11:52:57	It does what it	11:55:32 11	Q. You've never seen that?
11:52:59 11	Q. Okay.	11:55:32 11	A. No.
11:52:59 12	A says it will do, is maintain	11:55:34 12	Q. Okay. How often do you see it on a IV pole?
	normothermic.		
11:53:02 14		11:55:38 14	A. Depends on the facility
1:53:02 15	<b>Q.</b> Okay. And when you were called by defense counsel in this case you agreed to handle the case;	11:55:39 15	Q. Okay.
11:53:15 16	, -		<ul><li>A and how they want to</li><li>Q. How often?</li></ul>
11:53:17	correct?	11:55:40 17	
11:53:17 18	A. Yes. After discussion, yes.	11:55:43 18	
11:53:19 19	Q. Okay. Did you look at any literature or do	11:55:44 19	Q. How often do you see it on an IV pole in a
1:53:22 20	any research before you decided to be a defense for	11:55:48 20	total knee or total hip arthroplasty?
1:53:26 21	the expert?	11:55:50 21	A. I can't answer that. I don't have a
1:53:27 22	<b>A.</b> No.	11:55:52 22	correlation.
1:53:39 23	Q. Do you know how much air is blown out of a	11:55:52 23	Q. What color is the rolling cart?
11:53:44 24	Bair Hugger when it's in use?	11:55:55 24	<b>A.</b> I believe it's the same color as the device,
11:53:46 <b>25</b>	A. No.	11:55:57 <b>25</b>	blue.
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11:53:48	<b>Q.</b> Do you know what the temperature of the air	11:55:58 <b>1</b>	<b>Q.</b> Okay. And where is the Bair Hugger usually
1:53:49 <b>2</b>	is that comes out of the blanket in the Bair Hugger?	11:56:02 <b>2</b>	placed in the operating room?
1:53:51 <b>3</b>	A. No.	11:56:03 <b>3</b>	<b>A.</b> At the head of the bed.
1:54:25 4	Q. On page 4, on the paragraph that begins,	11:56:04 <b>4</b>	Q. Okay. Well isn't the anesthesiologist
1:54:38 <b>5</b>	"the anesthesia provider."	11:56:07 <b>5</b>	sitting at the head?
1:54:39 6	A. Yes.	11:56:08 6	A. Yes.
1:54:40 7	Q. It says, the last sentence: "The air	11:56:08 7	Q. Okay. So
1:54:43	directed through the Bair Hugger blanket to the	11:56:10 8	A. It's next to or adjacent to him or her.
1:54:44 9	patient is a gentle or mild air flow."	11:56:12 9	Q. Underneath the bed?
1:54:47 10	Did I read that correctly?	11:56:14 10	A. No, not. Adjacent. And if it's a lower end
1:54:48 11	<b>A.</b> Yes.	11:56:18 11	unit it's at the foot.
1:54:48 12	Q. What's your basis if you don't know what the	11:56:20 12	<b>Q.</b> I understand that.
1:54:51 13	the speed of the air coming out?	11:56:21 13	But for a total hip or total knee where
1:54:53 14	A. That's just from my opinion in feeling it.	11:56:23 14	you're using an upper body blanket.
1:54:59 15	That's my opinion.	11:56:25 15	A. Correct.
1:55:00 16	Q. Okay. So you have no scientific basis, it's	11:56:25 16	<b>Q.</b> Okay.
1:55:03 17	just your opinion.	11:56:26 17	<b>A.</b> So it would be adjacent to the machine or
1:55:04 18	A. Correct.	11:56:27 18	the cart, depending on how the anesthesia's
	Q. Okay.	11:56:30 19	assembled their work area.
1:55:04 19	<b>A.</b> Correct. The same as with the "strong," the	11:56:32 <b>20</b>	Q. When you say "the machine or the cart"?
	<b>3.</b> • • •	11:56:34 <b>21</b>	A. Anesthesia machine or their cart
1:55:04 <b>20</b>	adjective of "strong" with the overhead		Q. Okay.
1:55:04 <b>20</b> 1:55:06 <b>21</b>		11:56:34 <b>22</b>	
1:55:04 <b>20</b> 1:55:06 <b>21</b> 1:55:08 <b>22</b>	adjective of "strong" with the overhead Q. Okay. A air.	11:56:34 <b>22</b> 11:56:36 <b>23</b>	•
11:55:04 <b>20</b> 11:55:06 <b>21</b> 11:55:08 <b>22</b> 11:55:09 <b>23</b>	<ul><li>Q. Okay.</li><li>A air.</li></ul>	11:56:36 23	<b>A.</b> which they usually have for medications.
11:55:04 <b>20</b> 11:55:06 <b>21</b> 11:55:08 <b>22</b> 11:55:09 <b>23</b> 11:55:10 <b>24</b>	<ul><li>Q. Okay.</li><li>A air.</li><li>Q. So it's a very subjective opinion; correct?</li></ul>	11:56:36 <b>23</b> 11:56:39 <b>24</b>	<ul><li>A which they usually have for medications.</li><li>Q. Do you know how long the hose is of the Bair</li></ul>
11:55:04 19 11:55:04 20 11:55:06 21 11:55:08 22 11:55:09 23 11:55:10 24 11:55:13 25	<ul><li>Q. Okay.</li><li>A air.</li><li>Q. So it's a very subjective opinion; correct?</li><li>A. Yes.</li></ul>	11:56:36 23	<ul><li>A which they usually have for medications.</li><li>Q. Do you know how long the hose is of the Bair Hugger blanket?</li></ul>
11:55:04 <b>20</b> 11:55:06 <b>21</b> 11:55:08 <b>22</b> 11:55:09 <b>23</b> 11:55:10 <b>24</b>	<ul><li>Q. Okay.</li><li>A air.</li><li>Q. So it's a very subjective opinion; correct?</li></ul>	11:56:36 <b>23</b> 11:56:39 <b>24</b>	<ul><li>A which they usually have for medications.</li><li>Q. Do you know how long the hose is of the Bair</li></ul>

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12:07:07 <b>1</b>	<b>Q.</b> What'd you provide to defendant to	12:09:05 <b>1</b>	invoice, but that may not have been the date I
12:07:09 <b>2</b>	Did you provide the defendant any receipts?	12:09:08 <b>2</b>	purchased, and I don't have the receipts today.
12:07:11 3	A. I don't recall.	12:09:18 3	Q. But you do have the receipts.
12:07:11 4	Q. Okay. I mean, the reason why I'm asking is	12:09:19 4	A. Yes.
_	I've never seen that done because I've purchased many	12:09:20 <b>5</b>	Q. Okay. Well I ask you, please don't destroy
12:07:21 6	articles.	12:09:26	those receipts. I may subpoena them.
12:07:21 7	A. Umm-hmm.	12:09:28 7	A. Okay.
12:07:22	<b>Q.</b> I can't even look at them until I've	12:09:41 8	MR. ASSAAD: All right. Let's take lunch.
12:07:23	purchase them.	12:09:45	THE WITNESS: Okay.
12:07:24 10	<b>A.</b> Yeah.	12:09:46 10	THE REPORTER: Off the record, please.
12:07:24 11	Q. So are you under a different plan than	12:09:48 11	(Luncheon recess taken at
12:07:27 12	everyone else in the world?	12	approximately 12:09 p.m.)
12:07:28 13	<b>A.</b> I don't know. I don't remember.	13	аррисиния = 1.00 рини)
	Q. Well it wasn't that	14	
12:07:29 14			
12:07:30 15	<b>A.</b> I remember reading them and remembering	15	
12:07:32 16	wanting to print, and I had to purchase to print.	16	
12:07:36 17	Q. Okay. And you don't have those articles	17	
12:08:00 18	today with you; correct?	18	
12:08:01 19	A. Correct.	19	
12:08:01 <b>20</b>	Q. Were you told not to bring anything today?	20	
12:08:04 21	<b>A.</b> I asked, and was told I didn't need to.	21	
12:08:04 21		22	
	Q. Okay. Do you think having those articles		
12:08:08 23	here today would help you better answer the questions	23	
12:08:11 <b>24</b>	and review your report?	24	
12:08:12 <b>25</b>	<b>A.</b> I don't know. I don't Can't answer "yes"	25	
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1	106	1	108
12:08:15	or "no."	1	AFTERNOON SESSION
12:08:15	or "no."  Q. Okay. Well we did talk about one article	2	AFTERNOON SESSION (Deposition reconvened at
•	or "no."  Q. Okay. Well we did talk about one article regarding the traffic flow, and you didn't have it		AFTERNOON SESSION
12:08:15	or "no."  Q. Okay. Well we did talk about one article regarding the traffic flow, and you didn't have it today, and you wanted to look at	2	AFTERNOON SESSION (Deposition reconvened at
12:08:15 <b>2</b> 12:08:19 <b>3</b>	or "no."  Q. Okay. Well we did talk about one article regarding the traffic flow, and you didn't have it	2	AFTERNOON SESSION (Deposition reconvened at approximately 12:50 p.m.)
12:08:15 <b>2</b> 12:08:19 <b>3</b> 12:08:21 <b>4</b>	or "no."  Q. Okay. Well we did talk about one article regarding the traffic flow, and you didn't have it today, and you wanted to look at	2 3 4	AFTERNOON SESSION  (Deposition reconvened at approximately 12:50 p.m.)  BY MR. ASSAAD:
12:08:15 <b>2</b> 12:08:19 <b>3</b> 12:08:21 <b>4</b> 12:08:22 <b>5</b>	or "no."  Q. Okay. Well we did talk about one article regarding the traffic flow, and you didn't have it today, and you wanted to look at  A. Correct.	2 3 4 12:50:36 5	AFTERNOON SESSION (Deposition reconvened at approximately 12:50 p.m.) BY MR. ASSAAD: Q. Are you ready to continue?
12:08:15 <b>2</b> 12:08:19 <b>3</b> 12:08:21 <b>4</b> 12:08:22 <b>5</b> 12:08:22 <b>6</b> 12:08:24 <b>7</b>	or "no."  Q. Okay. Well we did talk about one article regarding the traffic flow, and you didn't have it today, and you wanted to look at  A. Correct.  Q and you wanted to look at it to answer	2 3 4 12:50:36 5 12:50:37	AFTERNOON SESSION (Deposition reconvened at approximately 12:50 p.m.) BY MR. ASSAAD: Q. Are you ready to continue? A. Yes. Thank you. Q. In reviewing your report you have seven
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12:08:15	Q. Okay. Well we did talk about one article regarding the traffic flow, and you didn't have it today, and you wanted to look at A. Correct. Q and you wanted to look at it to answer some questions; correct? A. Correct. Q. Okay. So you agree with me A. To To refresh my memory. Q. So you agree with me that if you had brought the articles with you today it might help you refresh your memory. A. It might have. MS. LEWIS: She wasn't under an obligation to. THE WITNESS: Obligation to. I was not required or requested to bring them. Q. And just so I understand, you did not purchase these articles before you wrote your report; correct? A. I purchased them I don't remember the date. Q. Well according	2 3 4 12:50:36 5 12:50:37 6 12:50:48 7 12:50:52 8 12:50:54 10 12:50:59 11 12:51:02 12 12:51:05 14 12:51:05 15 12:51:05 15 12:51:09 16 12:51:13 18 12:51:17 19 12:51:21 20 12:51:22 21 12:51:33 23 12:51:36 24	AFTERNOON SESSION (Deposition reconvened at approximately 12:50 p.m.) BY MR. ASSAAD:  Q. Are you ready to continue? A. Yes. Thank you. Q. In reviewing your report you have seven references; correct? A. Yes. Q. And would it be fair to say that all statements that you rely on these references you have cited in your you cite you put a footnote in your report? A. Yes. Q. Okay. And the statements that have no references, is that just based on your personal opinion? A. Yes, and knowledge. Q. And would it be fair to say that the statements that do not have any footnotes at the end of them in your report of Exhibit 1 you're not relying on any literature to support those statements? MS. LEWIS: Objection, form. A. No.

	CASE 0:15-md-02666-JNE-DTS Doc CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>, 828-2</del>	Filed 09/12/17 Page 16 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	113		115
12:56:25	A. Yes.	12:58:46	A. Correct.
12:56:25	Q. Okay. Why is that in here?	12:58:47	Q. Okay. But you're not going to offer any
12:56:28	A. Just to talk about, again, more of the	12:58:51 3	opinions of whether or not a a device that could be
12:56:31	equipment that's in the room. The cautery device has	12:58:57	contaminated with bacteria could cause a surgical-site
12:56:35 <b>5</b>	a cooling unit, causes some warmth to the room. The	12:58:59 <b>5</b>	infection; correct?
12:56:42	compression devices have cooling have a little fan	12:59:00 6	A. Correct.
12:56:44 7	to cool the motor. So do the cameras and the light	12:59:00 7	Q. Okay. And were you under the impression
12:56:47	boxes.	12:59:06	that there was a dispute among the parties of whether
12:56:48	Q. Okay. You said the electrocautery unit	12:59:09	or not everything in the operating room was
12:56:50 10	provides warmth to the room?	12:59:10 10	contaminated or not?
12:56:51 11	A. No, no, no. It has its own warmth.	12:59:13 11	A. I'm not sure I understand your question.
12:56:58 12	Q. You stated: "The cautery device has a	12:59:14 12	Q. Well were you under the impression that the
12:57:00 13	cooling unit, causes some warmth to the room."	12:59:16 13	plaintiffs are alleging that an operating room is
12:57:03 14	A. Okay. Let me restatement that so it's	12:59:18 14	completely sterile?
12:57:05 15	restate it, so it's clearer.	12:59:21 15	A. No, I didn't understand there that that
12:57:08 16	The electrocautery device has its own motor	12:59:24 16	was their premise.
12:57:10 17	and cooling device. The fan inside, my understanding,	12:59:25 17	Q. Well I'm just trying to understand the
12:57:14 18	is to cool the motor, to keep it at normal temp, keep	12:59:26 18	purpose of your report, like what are you what is
12:57:19 19	it at a maintained temperature.	12:59:28 19	your conclusions besides there are devices and
12:57:20 <b>20</b>	Q. Okay.	12:59:32 <b>20</b>	equipment in the operating room that may or may not be
12:57:25 <b>21</b>	A. Like a computer fan, if you will.	12:59:34 <b>21</b>	contaminated?
12:57:27 <b>22</b>	<b>Q.</b> Do you know how much airflow that produces?	12:59:38 <b>22</b>	<b>A.</b> I'm sorry. Ask the question again. I'm not
12:57:28 23	A. I do not.	12:59:41 <b>23</b>	sure I'm
12:57:30 <b>24</b>	Q. Do you know whether or not they allow	12:59:41 <b>24</b>	Q. I've read your
12:57:32 <b>25</b>	contaminants to cause surgical-site infections?	12:59:42 <b>25</b>	A able to answer answer your
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	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	114		116
12:57:34	A. I do not.	12:59:43	Q all your opinions in your report
12:57:35 2	<b>Q.</b> Okay. So what's the point of your opinion	12:59:46 <b>2</b>	Or all your opinions are in your report of
12:57:37 3	here? What's the purpose?	12:59:48 3	Exhibit 1 and your references, and you basically say,
12:57:38 4	<b>A.</b> The purpose, again, is to describe the	12:59:53 4	in conclusion, "it is my expert opinion that the
12:57:40 <b>5</b>	environment for the patient and all of the devices	12:59:55 5	operating room is a clean, but not completely sterile,
12:57:43 6	that are in the room. It's not a, as you would	12:59:58 6	environment."
12:57:47 7	describe, sterile environment, it is a clean	12:59:59 7	A. Correct.
12:57:50	environment with lots of pieces of equipment	13:00:00	Q. Okay.
12:57:52 9	supporting the patient and near the patient.	13:00:00 9	A. I would agree, yes.
12:57:54 10	Q. But you have no opinion whether or not, for	13:00:01 10	<b>Q.</b> That bacteria cannot be eliminated from the operating room environment.
12:57:57 <b>11</b> 12:58:01 <b>12</b>	example, any of these devices would cause a surgical site infection.	13:00:03 <b>11</b> 13:00:05 <b>12</b>	
12:58:01 <b>12</b> 12:58:02 <b>13</b>	A. Correct.	13:00:05 12	A. That's correct. I would agree.     Q. The operating room equipment, including
12:58:02 13	Q. Okay. I'm just trying to figure out	13:00:07 13	equipment that will be close to the surgical field,
12:58:02 14	I'm representing over 2700 people in the	13:00:09 14	quote, and are not or parentheses, and are not
12:58:14 13	multidistrict litigation, and I need to understand the	13:00:12 15	covered by sterile drapes, closed parentheses, contain
12:58:17 10	basis for your opinions to determine whether or not	13:00:14 16	bacteria and are not sterile.
12:58:22 18	your opinions are reliable. You understand that?	13:00:18 18	A. Correct.
12:58:26 19	A. Yes.	13:00:18 19	Q. Okay. That's pretty much the sum of your
12:58:27 20	Q. That's why we're here today; correct?	13:00:20 20	opinions in this case.
12:58:28 21	A. Yes.	13:00:21 21	A. Yes.
12:58:29 <b>22</b>	Q. So for lack of, you know, going into	13:00:22 22	Q. Okay. But, for example, is the anesthesia
12:58:38 23	specific detail, is the summation of your opinions	13:00:28 23	machine sterile?
12:58:39 24	that there are just many equipment and devices in the	13:00:30 24	A. No.
12:58:42 <b>25</b>	operating room and they may or may not be sterile?	13:00:30 <b>25</b>	Q. Okay. Why is that important?
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]	CASE 0:15-md-02666-JNE-DTS Doc CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>. 828-2</del>	Filed 09/12/17 Page 17 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	117		119
13:00:35	<b>A.</b> Why	13:02:41 <b>1</b>	A. I'm not sure I follow your question.
13:00:36 <b>2</b>	Q. In this case?	13:02:44 <b>2</b>	<b>Q.</b> Okay. Okay.
13:00:37 3	A. It's again another piece of equipment that's	13:02:45 3	<b>A.</b> Try I'm trying to follow it.
13:00:39 4	brought in close to the patient and could have some	13:02:47 4	Q. We discussed that the anesthesia machine, if
13:00:42 <b>5</b>	contaminants that are transferred to the patient.	13:02:49 <b>5</b>	it is contaminated, that the only way that the
13:00:44 6	Q. How would they be transferred?	13:02:53	contaminants would be transferred from the anesthesia
13:00:46 7	A. Fingers.	13:02:55 7	machine to the surgical site would be by contact.
13:00:46	<b>Q.</b> Any other way?	13:03:00	<b>A.</b> Touch.
13:00:48	A. Not that I'm aware of.	13:03:01 9	<b>Q.</b> Okay.
13:00:49 10	Q. Well do you agree with me that it would be a	13:03:02 10	<b>A.</b> Yes. We agree.
13:00:51 11	deviation of the standard of care for a surgeon or a	13:03:03 11	Q. You don't believe that the bacteria could be
13:00:56 12	scrub nurse or any of the assistants that are	13:03:05 12	aerosolized; correct?
13:00:58 13	operating on the on the surgical site to touch the	13:03:07 13	A. I don't know if
13:01:01 14	anesthesia machine and then put their hands into the	13:03:07 14	<b>Q.</b> Okay.
13:01:03 15	sterile field?	13:03:08 15	<b>A.</b> if it could or could not.
13:01:04 16	<b>A.</b> Correct. That would be incorrect. That	13:03:09 16	Q. Okay.
13:01:05 17	would not be good practice.	13:03:10 17	A. I don't have that knowledge.
13:01:07 18	Q. Okay. Actually, if a patient got infected,	13:03:11 18	Q. Okay. So my point is is that if the if
13:01:10 19	if a scrub nurse touched the anesthesia machine and	13:03:15 19	the healthcare providers, the surgeons, the
13:01:10 13	then touched the sterile field and there was an	13:03:15 13	assistants, the nurses in the operating room are
13:01:16 21	infection, you'd agree with me that you would probably	13:03:23 21	following the standard of care, the fact that there
13:01:20 22	testify that that scrub nurse deviated from the	13:03:27 22	may be contaminants on the anesthesia machine is not a
13:01:22 23	standard of care; correct?	13:03:36 23	risk factor for causing surgical-site infections
13:01:22 23	A. Yes.	13:03:36 23	during an operation.
13:01:24 <b>24</b>	Q. Okay. Now let's just assume that doctors	13:03:40 <b>24</b>	A. I
13:01:25 <b>ZJ</b>	STIREWALT & ASSOCIATES	13:03:42 23	STIREWALT & ASSOCIATES
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13:01:31	are doing what they're supposed to be doing and	13:03:42 1	MS. LEWIS: Object to the form.
13:01:33 2	following the standard of care, and all of the nurses	13:03:42 <b>2</b>	<b>A.</b> I don't know that I can answer that.
13:01:35	are following the standard of care. You agree with me	13:03:44 <b>3</b>	Q. Okay. Do you know whether or not the Bair
13:01:37 4	that the fact that the anesthesia machine has bacteria	13:03:49 4	Hugger's contaminated?
13:01:40 <b>5</b>	on it	13:03:51 <b>5</b>	A. I do not.
13:01:44 6	<b>A.</b> I'm not aware of that it has bacteria on it.	13:03:52	Q. Okay. Were you ever
13:01:47	<b>Q.</b> Well it can be contaminated, potentially.	13:03:57	·
13:01:50		10.00.01	were you ever lold by 3M that they concede
	A. Porentially.	13:04:02	Were you ever told by 3M that they concede that the Bair Hugger is not sterile?
13:01:52	A. Potentially. Q. Wait.	13:04:02 <b>8</b>	that the Bair Hugger is not sterile?
13:01:52 9	<b>Q.</b> Wait.	13:04:04 <b>9</b>	that the Bair Hugger is not sterile? <b>A.</b> No. It is not It is not sterile.
13:01:53 10	Q. Wait.  Do you know whether or not any of the	13:04:04 <b>9</b> 13:04:10 <b>10</b>	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware
13:01:53 <b>10</b> 13:01:55 <b>11</b>	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?	13:04:04 <b>9</b> 13:04:10 <b>10</b> 13:04:12 <b>11</b>	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair
13:01:53 <b>10</b> 13:01:55 <b>11</b> 13:01:57 <b>12</b>	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not.	13:04:04 <b>9</b> 13:04:10 <b>10</b> 13:04:12 <b>11</b> 13:04:19 <b>12</b>	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?
13:01:53	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not. Q. Okay. But for the for patient safety you	13:04:04 <b>9</b> 13:04:10 <b>10</b> 13:04:12 <b>11</b> 13:04:19 <b>12</b> 13:04:21 <b>13</b>	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.
13:01:53	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and	13:04:04 <b>9</b> 13:04:10 <b>10</b> 13:04:12 <b>11</b> 13:04:19 <b>12</b> 13:04:21 <b>13</b> 13:04:21 <b>14</b>	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.
13:01:53	<ul> <li>Q. Wait. Do you know whether or not any of the devices have bacteria on them or not? A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.</li> </ul>	13:04:04 9 13:04:10 10 13:04:12 11 13:04:19 12 13:04:21 13 13:04:22 14 13:04:27 15	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:04 15 13:02:05 16	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not.  Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.  A. Yes.	13:04:04 9 13:04:10 10 13:04:12 11 13:04:19 12 13:04:21 13 13:04:22 14 13:04:27 15 13:04:28 16	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:04 15 13:02:05 16 13:02:06 17	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.  A. Yes. Q. Okay. So unless someone unless you	13:04:04 9 13:04:10 10 13:04:12 11 13:04:19 12 13:04:21 13 13:04:22 14 13:04:28 16 13:04:33 17	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:04 15 13:02:05 16 13:02:06 17 13:02:17 18	Q. Wait. Do you know whether or not any of the devices have bacteria on them or not? A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room. A. Yes. Q. Okay. So unless someone unless you transfer any of the potential contaminants on an	13:04:04 9 13:04:10 10 13:04:12 11 13:04:21 13 13:04:21 14 13:04:27 15 13:04:28 16 13:04:33 17 13:04:33 18	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?  A. Did I do a what?
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:04 15 13:02:05 16 13:02:06 17 13:02:17 18 13:02:20 19	Q. Wait. Do you know whether or not any of the devices have bacteria on them or not? A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room. A. Yes. Q. Okay. So unless someone unless you transfer any of the potential contaminants on an anesthesia machine directly to the surgical site, the	13:04:04 9 13:04:10 10 13:04:12 11 13:04:21 13 13:04:22 14 13:04:27 15 13:04:28 16 13:04:33 17 13:04:33 18 13:04:34 19	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?  A. Did I do a what?  MS. LEWIS: Same objection.
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:04 15 13:02:05 16 13:02:06 17 13:02:17 18 13:02:20 19 13:02:24 20	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.  A. Yes. Q. Okay. So unless someone unless you transfer any of the potential contaminants on an anesthesia machine directly to the surgical site, the by contact, you agree with me that unless that	13:04:04 9 13:04:10 10 13:04:19 12 13:04:21 13 13:04:22 14 13:04:27 15 13:04:28 16 13:04:33 17 13:04:34 19 13:04:36 20	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?  A. Did I do a what?  MS. LEWIS: Same objection.  Q. Any research.
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:04 15 13:02:05 16 13:02:06 17 13:02:17 18 13:02:21 19 13:02:24 20 13:02:28 21	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not.  Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.  A. Yes.  Q. Okay. So unless someone unless you transfer any of the potential contaminants on an anesthesia machine directly to the surgical site, the by contact, you agree with me that unless that deviation of the standard of care occurs, that the	13:04:04 9 13:04:10 10 13:04:12 11 13:04:19 12 13:04:21 13 13:04:22 14 13:04:28 16 13:04:38 17 13:04:38 18 13:04:34 19 13:04:36 20 13:04:37 21	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?  A. Did I do a what?  MS. LEWIS: Same objection.  Q. Any research.  A. No.
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:04 15 13:02:06 17 13:02:17 18 13:02:20 19 13:02:28 21 13:02:35 22	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.  A. Yes. Q. Okay. So unless someone unless you transfer any of the potential contaminants on an anesthesia machine directly to the surgical site, the by contact, you agree with me that unless that deviation of the standard of care occurs, that the there's no way that the bacteria on the anesthesia	13:04:04 9 13:04:10 10 13:04:12 11 13:04:21 13 13:04:22 14 13:04:27 15 13:04:28 16 13:04:33 17 13:04:33 18 13:04:34 19 13:04:36 20 13:04:37 21 13:04:49 22	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?  A. Did I do a what?  MS. LEWIS: Same objection.  Q. Any research.  A. No.  Q. You write on page 2, "as each piece" at
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:05 16 13:02:06 17 13:02:17 18 13:02:20 19 13:02:24 20 13:02:28 21 13:02:35 22 13:02:38 23	Q. Wait. Do you know whether or not any of the devices have bacteria on them or not?  A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.  A. Yes. Q. Okay. So unless someone unless you transfer any of the potential contaminants on an anesthesia machine directly to the surgical site, the by contact, you agree with me that unless that deviation of the standard of care occurs, that the there's no way that the bacteria on the anesthesia machine is going to transfer to the surgical site and	13:04:04 9 13:04:10 10 13:04:12 11 13:04:21 13 13:04:22 14 13:04:27 15 13:04:28 16 13:04:33 17 13:04:34 19 13:04:36 20 13:04:37 21 13:04:49 22 13:04:58 23	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?  A. Did I do a what?  MS. LEWIS: Same objection.  Q. Any research.  A. No.  Q. You write on page 2, "as each piece" at the bottom of page 2, the last sentence.
13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:05 16 13:02:05 17 13:02:17 18 13:02:20 19 13:02:24 20 13:02:28 21 13:02:35 22 13:02:35 23 13:02:39 24	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.  A. Yes. Q. Okay. So unless someone unless you transfer any of the potential contaminants on an anesthesia machine directly to the surgical site, the by contact, you agree with me that unless that deviation of the standard of care occurs, that the there's no way that the bacteria on the anesthesia machine is going to transfer to the surgical site and cause an infection; correct?	13:04:04 9 13:04:10 10 13:04:19 12 13:04:21 13 13:04:22 14 13:04:28 16 13:04:28 16 13:04:33 17 13:04:34 19 13:04:36 20 13:04:37 21 13:04:49 22 13:04:58 23 13:05:00 24	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?  A. Did I do a what?  MS. LEWIS: Same objection.  Q. Any research.  A. No.  Q. You write on page 2, "as each piece" at the bottom of page 2, the last sentence.  A. Umm-hmm. Okay.
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13:01:53 10 13:01:55 11 13:01:57 12 13:01:58 13 13:02:01 14 13:02:04 15 13:02:05 16 13:02:06 17 13:02:17 18 13:02:20 19 13:02:24 20 13:02:28 21 13:02:35 22 13:02:38 23 13:02:39 24	Q. Wait.  Do you know whether or not any of the devices have bacteria on them or not?  A. I do not. Q. Okay. But for the for patient safety you assume they do when you teach proper regulations and procedures in the operating room.  A. Yes. Q. Okay. So unless someone unless you transfer any of the potential contaminants on an anesthesia machine directly to the surgical site, the by contact, you agree with me that unless that deviation of the standard of care occurs, that the there's no way that the bacteria on the anesthesia machine is going to transfer to the surgical site and cause an infection; correct?	13:04:04 9 13:04:10 10 13:04:19 12 13:04:21 13 13:04:22 14 13:04:28 16 13:04:28 16 13:04:33 17 13:04:34 19 13:04:36 20 13:04:37 21 13:04:49 22 13:04:58 23 13:05:00 24	that the Bair Hugger is not sterile?  A. No. It is not It is not sterile.  Q. Were you ever told by 3M that they're aware that the hose of the inside the hose of the Bair Hugger contains or harbors bacteria?  A. No.  MS. LEWIS: Objection to form.  Q. Did you do a search to find out whether or not the Bair Hugger contains, or is harbors bacteria?  A. Did I do a what?  MS. LEWIS: Same objection.  Q. Any research.  A. No.  Q. You write on page 2, "as each piece" at the bottom of page 2, the last sentence.  A. Umm-hmm. Okay.

	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>828-2</del>	Filed 09/12/17 Page 18 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	121		123
13:05:04	it is then brought close to the surgical field."	13:06:58	A. Is sterile.
•	What's the importance of that?	13:06:58 2	Q. Okay.
	<b>A.</b> I think It's just, again, describing the	13:06:58 2	<b>A.</b> Device. But the machine is not.
13:05:11 <b>3</b> 13:05:26 <b>4</b>	lo the patient and the patient process in the room	13:00:58 4	Q. Okay. You agree that there is a difference
13:05:26 <b>5</b>	and how the patient is the center and the equipment	13:07:10 <b>5</b>	between "not sterile" and "contaminated"?
13:05:32	then is brought in close to support the patient.	13:07:14	<b>A.</b> There are two different definitions.
13:05:35 7	<b>Q.</b> Does that have any relevance with respect to	13:07:17 7	Q. Okay. What's your definition of "not
13:05:37	the risk of infection?	13:07:18	sterile"?
13:05:38	<b>A.</b> Not with just one sentence, no.	13:07:19	A. Unsterile. Unsterile and not sterile
13:05:38 10	Q. Well	13:07:24 10	Unsterile is something that is considered not sterile,
13:05:41 11	A. No.	13:07:27 11	but it may in fact be clean. Depends on the device.
13:05:41 12	<b>Q.</b> the fact	13:07:33 12	Contaminated means it may have gross
13:05:41 13	<b>A.</b> No.	13:07:37 13	bacteria or gross contamination, spill of blood or
13:05:42 14	<b>Q.</b> The fact that equipment are brought close to	13:07:40 14	body fluid.
13:05:44 15	the patient that and brought close to the surgical	13:08:05 15	Q. You mentioned that you're not sure whether
13:05:47 16	field that may be contaminated, is that relevant to	13:08:07 16	or not the non-sterile equipment contained bacteria.
13:05:51 17	the risks of a surgical-site infection?	13:08:09 17	Remember that?
13:05:53 18	MS. LEWIS: Objection to form.	13:08:10 18	<b>A.</b> Yes.
13:05:54 19	A. Say that question again.	13:08:11 19	<b>Q.</b> But if you look at your sentence on page 3
13:05:55 <b>20</b>	Q. Well I talk	13:08:13 <b>20</b>	you say: "The equipment in the operating room
13:05:57 <b>21</b>	You talk about the operating room is clean,	13:08:15 <b>21</b>	including equipment that will be close to the surgical
13:05:59 <b>22</b>	but not sterile; correct?	13:08:18 22	field (examples, anesthesia machine, electrosurgical
13:06:01 23	<b>A.</b> Umm-hmm.	13:08:22 23	cautery device, IV poles and pumps, anesthesia cart,
13:06:02 <b>24</b>	<b>Q.</b> "Yes"?	13:08:25 <b>24</b>	computer monitors and hard drives, patient warming
13:06:02 <b>25</b>	A. Yes.	13:08:29 <b>25</b>	devices, suction bottles, overhead lights, compression
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	122		124
13:06:05	<b>Q.</b> And you're discussing this talking about the	13:08:35	124 sleeve device, closed parentheses, contain bacteria
13:06:06 2	Q. And you're discussing this talking about the like, devices that are not sterile	13:08:38 2	124 sleeve device, closed parentheses, contain bacteria and are not sterile."
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	CASE 0:15-md-02666-JNE-DTS Doc CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>. 828-2</del>	Filed 09/12/17 Page 19 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 129		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
13:12:12 1	used in a total hip or total knee surgery?	13:14:18 1	<b>A.</b> It's on the side. The ones I've seen it's
13:12:12	<b>A.</b> The whole procedure. The entire procedure.	13:14:18	been on the side. I It's mounted vertically, not
13:12:18 3	Q. You're telling me they're using an	13:14:24 3	horizontally, and so it's on that, like
13:12:20 4	electrocautery device during the entire procedure?	13:14:28 4	Q. Are you seeing
13:12:22 <b>5</b>	A. Yes.	13:14:30 <b>5</b>	Like could you see holes on the side of the
13:12:23 6	Q. Okay. What does the electrocautery device	13:14:31 6	
13:12:26 7	do?	13:14:31 7	A. Yeah.
13:12:27 8	A. Cauterizes and cuts tissue.	13:14:32	<b>Q.</b> Okay.
13:12:29 9	Q. Okay. And they're cutting and cauterizing	13:14:33 9	<b>A.</b> And the fan
13:12:30 10	the entire procedure?	13:14:34 10	And the whole round area where the fan sits.
13:12:31 11	A. Yep. Yes.	13:14:35 11	<b>Q.</b> And you believe that's on the side of a CPU?
13:12:33 12	Q. How long does a total hip or total knee	13:14:38 12	<b>A.</b> I don't know if it's the side or the end. I
13:12:35 13	last?	13:14:40 13	don't know.
13:12:36 14	<b>A.</b> Depends on the surgeon.	13:14:40 14	<b>Q.</b> Okay. You're I mean, you're guessing;
13:12:37 15	Q. In your experience?	13:14:42 15	right?
13:12:38 16	A. A knee can be an hour or more, and a hip can	13:14:43 16	<b>A.</b> Well I'm describing what my recollection of
13:12:42 17	be an hour and a half or more.	13:14:44 17	the unit looks like.
13:13:08 18	Q. You say computer monitors blow air?	13:14:45 18	Q. Okay. Do you have any reason to believe
13:13:10 19	<b>A.</b> Yes.	13:14:47 19	that that fan could cause contaminants to reach the
13:13:11 20	<b>Q.</b> And you can And you can feel them?	13:14:52 <b>20</b>	surgical site?
13:13:12 <b>21</b>	A. Yes.	13:14:52 <b>21</b>	A. I have no knowledge of that.
13:13:12 22	Q. Okay.	13:14:53 <b>22</b>	<b>Q.</b> Okay. What about with respect to the
13:13:13 23	<b>A.</b> The	13:14:56 23	electrocautery device, do you believe any reason that
13:13:13 24	Q. You don't know	13:14:59 24	fan
13:13:14 <b>25</b>	You don't know the rate, the velocity?	13:15:00 <b>25</b>	A. I have no knowledge of that.
	STIREWALT & ASSOCIATES		STIREWALT & ASSOCIATES
	1-800-553-1953 info@stirewalt.com		1-800-553-1953 info@stirewalt.com
	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	130		132
	A Na Na		And with warmant to all these devices that
13:13:16	A. No. No.	13:15:16 1	Q. And with respect to all these devices that
13:13:17 2	Q. Okay. Just out of curiosity, did you go to	13:15:19 2	potentially blow air, you're relying on your personal
13:13:17 <b>2</b> 13:13:23 <b>3</b>	<b>Q.</b> Okay. Just out of curiosity, did you go to an operating room after you'd been retained in this	13:15:19 <b>2</b> 13:15:22 <b>3</b>	potentially blow air, you're relying on your personal experience and not any literature to support that;
13:13:17 <b>2</b> 13:13:23 <b>3</b> 13:13:25 <b>4</b>	<b>Q.</b> Okay. Just out of curiosity, did you go to an operating room after you'd been retained in this case to go see what blows air?	13:15:19 <b>2</b> 13:15:22 <b>3</b> 13:15:25 <b>4</b>	potentially blow air, you're relying on your personal experience and not any literature to support that; correct?
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	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	CON	FIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	133	4	135
13:16:19	test the		Correct.
13:16:20 2	<b>A.</b> I've observed it. I've observed. From my		And you do all these procedures to prevent
13:16:22 3	observations.	3 infection;	
13:16:23 4	<ul><li>Q. But have you done testing?</li><li>A. No.</li></ul>		Correct.
13:16:24 5	Q. Have said, like, well let's check the	c A	And that is to limit traffic; correct? Yes.
13:16:25 6	bacterial load, or do swabs?		To make sure to keep the sterile field as
13:16:26 7	A. No.		possible; correct?
	Q. Okay. So you're just basically saying, hey,		
13:16:29 <b>9</b> 13:16:31 <b>10</b>	I see this person clean the operating room, I don't		So you agree with me that you do these extra
13:16:31 10	see them doing a good job, so there might be more		ns for implant surgeries because they're more
13:16:35 11	bacteria because of my observation.	•	le to infection.
13:16:42 13	A. Yes.	•	Not more susceptible. That's not what I
13:16:42 13	Q. Okay. No scientific basis at all.	8:18:59 <b>14</b> said.	Not more susceptible. That's not what I
13:16:47 15	A. Correct.		Then why do everything if they're not more
13:17:14 16	Q. On page 3 you talk about the drapes on the	8:19:04 <b>16</b> susceptib	
13:17:19 17	first you know, bringing in the drapes into the	•	You do it as a precaution to preve to
13:17:21 18	operating room.	18:19:08 <b>18</b> decrease	
13:17:21 19	A. Yes.		Why don't you do that for all surgeries,
13:17:22 20	Q. Then you say: "During any procedure that	8:19:10 <b>20</b> then?	my don't you do that for an surgenes,
13:17:24 21	will involve an implant, traffic into and out of the		That would be a good goal for all surgeries.
13:17:26 22	room is restricted."		Why not? Why for total hip and total knee
13:17:28 23	And we talked about that before; correct?		or colorectal?
13:17:30 24	A. Yes.		Good question. I don't have an answer for
13:17:30 25	Q. But sitting here today you have does that	8:19:21 <b>25</b> that.	cood question 1 don't have an anomer for
10.17.50	STIREWALT & ASSOCIATES	.10.21	STIREWALT & ASSOCIATES
	1-800-553-1953 info@stirewalt.com	1-	800-553-1953 info@stirewalt.com
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	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	CON	JEIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 134	CON	NFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 136
13:17:33 <b>1</b>			
13:17:33 <b>1</b> 13:17:35 <b>2</b>	134	9:19:22 <b>1 Q.</b>	136
•	134 have anything to do with contamination of the drapes?	19:22 <b>1 Q.</b> 19:24 <b>2</b> for these	136 So you just want to talk about what you do
13:17:35 2	have anything to do with contamination of the drapes?  A. No.	1 Q. 1919:22 <b>1 Q.</b> 1919:24 <b>2</b> for these 1919:27 <b>3</b> idea why	136 So you just want to talk about what you do total hip and total knee, but you have no
13:17:35 <b>2</b> 13:17:36 <b>3</b>	have anything to do with contamination of the drapes?  A. No.  Q. Okay. Can bacteria go through get	1 Q. 1919.22 1 Q. 1919.24 2 for these 1919.27 3 idea why 1919.28 4	136 So you just want to talk about what you do total hip and total knee, but you have no you do it?
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		CASE 0:15-md-02666-JNE-DTS DOC DIFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	. 020 2	HIEU U	0/12/17 Page 21 of 23 NFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
				CO	
		145			147
13:26:53 <b>1</b>		nate the implant because it may cause a	13:29:19 <b>1</b>	Α.	And it may also be used postoperatively.
13:26:55 2	_	-site infection.	13:29:21 2	Q.	,
13:26:55 <b>3</b>	Α.	Correct.	13:29:23		Do you know whether or not they're used by
13:27:50 4	Q.	On page 4, under the patient flow in the	13:29:24 4	all surge	ons during
13:27:53 <b>5</b>	operatir	ng room, I guess that's what you meant by	13:29:25 <b>5</b>	Α.	I do not.
13:27:55	"flow," '	'patient flow."	13:29:27 6	Q.	Okay.
13:27:56 7	-	Correct.	13:29:27 7		I do not.
_		Okay.	13:29:29	Q.	
13:27:57		•		-•	
13:27:57		I probably should have used a different	13:29:30 9		Maryland region?
13:27:59 10		ut yes. Patient process.	13:29:33 10	_	Massachusetts and New Jersey.
13:28:02 11		You write on the second paragraph under	13:29:34 11	Q.	Okay. Was that
13:28:04 12	there, th	ne device is you talk about compression	13:29:36 12		At what point in your life?
13:28:08 13	stocking	S.	13:29:38 13	Α.	The last two years.
13:28:08 14	A.	Yes.	13:29:39 14	Q.	Okay. As a nurse?
13:28:08 15	Q.	It says: "This device is used to decrease	13:29:40 15	A.	Yes.
13:28:10 16		of post-operative deep vein thrombosis" or	13:29:41 16	Q.	Okay. But you agree with me that this case
13:28:14 17	"blood o		13:29:47 17	-	out blood clots.
13:28:15 18		Yes.	13:29:48 18	<b>A.</b>	Correct.
				_	
13:28:16 19		What does that have to do with any of the	13:29:48 19	Q.	Okay.
13:28:18 20		n this case?	13:29:49 <b>20</b>	Α.	Correct.
13:28:19 <b>21</b>		I'm talking about, again, the patient flow,	13:29:53 21		Was one of your objectives in writing your
13:28:20 <b>22</b>	all of the	e pieces of equipment that are used on the	13:29:57 <b>22</b>	report is	to go through an operating room and identify
13:28:22 23	patient	in support of the patient during their	13:30:02 23	everythi	ng that may blow air?
13:28:24 <b>24</b>	surgical	procedure.	13:30:04 <b>24</b>	A.	No. It's to describe the again, the
13:28:26 <b>25</b>	Q.	What does that have to do with the issues in	13:30:08 25	patient p	process.
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		ONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER			NFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
				CO	
		146		0	148
13:28:27	this cas		13:30:08		Why is blowing air important? Why is that
13:28:27 2	Α.	It's also another device that has a fan.	13:30:11 2	relevant	?
13:28:32 3	Q.	A compression stocking?	13:30:13		Irrelevant?
13:28:33 4	Α.	The device, yes.	13:30:13 4	Q.	No. Why is it relevant to your
13:28:35 <b>5</b>	Q.	What device of a compression stocking has a	13:30:16 <b>5</b>		I mean, you've listed all these things that
13:28:38 6	fan?		13:30:17 6	may blov	w air. Why is it relevant to your opinions?
13:28:38 7	Α.	It's a little motor that sits either on an	_		
13:28:40	T) ( 1		13:30:20 7	A.	It's relevant whether or not the dis
10.20.10	IV pole	or on a stand or on the floor, and it blow	•		
12.20.4E <b>Q</b>	-	or on a stand or on the floor, and it blow	13:30:22	there's a	disruption to the flow, the positive flow
13:28:45 9	inflates	a stocking on the patient's leg during the	13:30:22 <b>8</b> 13:30:25 <b>9</b>	there's a for the -	disruption to the flow, the positive flow around the patient and the surgical site.
13:28:48 10	inflates procedu	a stocking on the patient's leg during the re.	13:30:22 <b>8</b> 13:30:25 <b>9</b> 13:30:28 <b>10</b>	there's a for the - <b>Q.</b>	disruption to the flow, the positive flow around the patient and the surgical site.  But you're not an engineer that could
13:28:48 <b>10</b> 13:28:49 <b>11</b>	inflates procedu <b>Q</b> .	a stocking on the patient's leg during the re. But then it stops.	13:30:22 <b>8</b> 13:30:25 <b>9</b> 13:30:28 <b>10</b> 13:30:30 <b>11</b>	there's a for the - Q. determin	disruption to the flow, the positive flow around the patient and the surgical site.  But you're not an engineer that could the that; correct?
13:28:48 <b>10</b> 13:28:49 <b>11</b> 13:28:51 <b>12</b>	inflates procedu Q. A.	a stocking on the patient's leg during the re. But then it stops. At the end of the procedure.	13:30:22 <b>8</b> 13:30:25 <b>9</b> 13:30:28 <b>10</b> 13:30:30 <b>11</b> 13:30:31 <b>12</b>	there's a for the - Q. determin A.	a disruption to the flow, the positive flow - around the patient and the surgical site. But you're not an engineer that could ne that; correct? Correct.
13:28:48 <b>10</b> 13:28:49 <b>11</b>	inflates procedu Q. A. Q.	a stocking on the patient's leg during the re.  But then it stops.  At the end of the procedure.  It keeps on	13:30:22 <b>8</b> 13:30:25 <b>9</b> 13:30:28 <b>10</b> 13:30:30 <b>11</b>	there's a for the - Q. determin A. Q.	disruption to the flow, the positive flow - around the patient and the surgical site. But you're not an engineer that could ne that; correct? Correct. Okay. Did you do any research to determine
13:28:48 <b>10</b> 13:28:49 <b>11</b> 13:28:51 <b>12</b>	inflates procedu Q. A. Q.	a stocking on the patient's leg during the re. But then it stops. At the end of the procedure.	13:30:22 <b>8</b> 13:30:25 <b>9</b> 13:30:28 <b>10</b> 13:30:30 <b>11</b> 13:30:31 <b>12</b>	there's a for the - Q. determin A. Q.	a disruption to the flow, the positive flow - around the patient and the surgical site. But you're not an engineer that could ne that; correct? Correct.
13:28:48	inflates procedu Q. A. Q.	a stocking on the patient's leg during the re. But then it stops. At the end of the procedure. It keeps on It runs dur It runs during the whole	13:30:22 <b>8</b> 13:30:25 <b>9</b> 13:30:28 <b>10</b> 13:30:30 <b>11</b> 13:30:31 <b>12</b> 13:30:31 <b>13</b>	there's a for the - Q. determin A. Q. whether	disruption to the flow, the positive flow - around the patient and the surgical site. But you're not an engineer that could ne that; correct? Correct. Okay. Did you do any research to determine
13:28:48 10 13:28:49 11 13:28:51 12 13:28:53 13 13:28:54 14	inflates procedu Q. A. Q. A. procedu	a stocking on the patient's leg during the re. But then it stops. At the end of the procedure. It keeps on It runs dur It runs during the whole	13:30:22 <b>8</b> 13:30:25 <b>9</b> 13:30:28 <b>10</b> 13:30:30 <b>11</b> 13:30:31 <b>12</b> 13:30:31 <b>13</b> 13:30:37 <b>14</b>	there's a for the - Q. determin A. Q. whether	a disruption to the flow, the positive flow - around the patient and the surgical site. But you're not an engineer that could ne that; correct? Correct. Okay. Did you do any research to determine whether or not any of these devices that have any effect on the airflow in an
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And sitting here today if I asked you about the same of the same o		CASE 0:15-md-02666-JNE-DTS Doc CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER	<del>828-2</del>	Filed 09/12/17 Page 22 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
Jame   2   any of the articles cited in Kellam that they   Jame   3   A   Correct.   Jame   4   Answer because you did not review them.   Jame   5   A   Correct.   Jame   6   A   Correct.   Jame   7   East   5   A   Correct.   Jame   7   East   6				
same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in Kellam that they same of the articles otded in the article shall be article from the United same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by one of same of the plaintiffs' report, which was done by on	13:58:20 1		14:01:29	
3 reviewed, the literature, you would not be able to answer because you did not review them.  5 A. Correct.  5 C. Did you even ask for any of the plaintiffs' and the	_		14:01:30 2	A. Correct.
4 A. Correct.  2021 1 A. Correct.  2022 1 G. Would you are ask for any of the plaintiffs' expert sports besides the orthopedic surgeon, Dr. 2024 1 A. No.  2024 1 G. Stounington?  2024 1 G. You did not see plaintiffs' computational cases 15 G. Would you be a plaintiffs' computational cases 15 G. Would you have taken that into consideration bears 2 states 3 A. No.  202	13:58:26	•	14:01:30 3	Q. And recommendations change; correct?
5 A. Correct.  2 Did you even ask for any of the plaintiffs' operators besides the orthopedic surgeon, Dr.  3 Stomington?  4 NS. LEWIS: Objection, form, to any  3 Minut dynamics expert's report; correct?  3 Stomington?  4 A. No.  3 Stomington?  5 A. Correct.  4 A. No.  4 Correct.  5 A. Correct.  5 Besides looking at AORN.  5 Besides looking at the literature, did you do any - did you correct?  6 A. Correct.  7 A. No.  8 A. No.  9 Conditions of whether or not the Bair Hugger is safe.  9 A. No.  9 Conditions and that, but you looked at an any or correct?  9 A. No.  9 Conditions and that, but you looked at an any or correct?  9 A. No.  9 Conditions and that was provided to you by the defense;  10 C. In was one own of the plaintiffs reposed to was one of the plaintiffs repose.  10 C. In was one own of divour or any own of thought and formulate or any own of the plaintiffs repose of the p		•		
Second Force   Seco	_		_	
Test	_		_	·
## 8 Stonnington?  ## MS, LEWIS: Objection, form, to any	_		_	
MS. LEWIS: Objection, form, to any discussions with counsel.  A. No. Q. You did not see plaintiffs' computational 20 Q. I mean we could talk about, you know, preparing the skin of the patient; correct?  A. No. Q. You did not see plaintiffs' computational 20 Q. Which shows the airflow similar to the 20 Qu. Which shows the airflow similar to the 21 Qu. Which shows the airflow similar to the 21 Qu. Which shows the airflow similar to the 21 Qu. Which shows the airflow similar to the 21 Qu. Would you - Would you have taken that into consideration 20 Qu. Would you have taken that into consideration 20 Qu. Would you have taken that into consideration 20 Qu. Would you have taken that into consideration 20 Qu. Would you have taken that into consideration 21 Qu. States, showed that the Bair Hugger does cause 21 Significant particle increase over the surgical site? MS. LEWIS: Objection, form. 21 A. No. MS. LEWIS: Objection, form. 22 Qu. MS. LEWIS: Objection, form. 23 Qu. MS. LEWIS: Objection, form. 24 Qu. MS. LEWIS: Objection, form. 24 Qu. MS. LEWIS: Objection, form. 25 Qu. Indept and into consideration 25 Qu. MS. LEWIS: Objection, form. 25 Qu. MS. LEWIS: Objection, form. 26 Qu. In your opinions of whether or not the Bair 140ger is safe. 27 Qu. In your opinions of whether or not the Bair 140ger is safe. 28 A. No. 29 Qu. MS. LEWIS: Objection, form. 24 Qu. MS. LEWIS: Objection, form. 25 Qu. MS. LEWIS: Obje			_	
1500 1 discussions with counsel.  1500 1 A. No.  2 You did not see plaintiffs' computational 2 You did dynamics expert's report; correct?  2 A. Correct.  3 You did dynamics expert's report; correct?  3 You did dynamics expert's report; correct?  4 A. Correct.  4 O. Which shows the airflow similar to the 3 Air Correct.  5 You did you saw; correct?  5 A. Correct.  5 You did you bave taken that into consideration 5 You did you have taken that into consideration 5 You did you do any did you create any Strike that. 5 You do you seek showed that the Bair Hugger does cause 5 You states, showed that the Bair Hugger does cause 5 You states, showed that the Bair Hugger does cause 5 You states, showed that the Bair Hugger does cause 5 You states, showed that the Bair Hugger does cause 5 You show that you saw; correct?  6 You ship you went you can keep going down this 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have a poinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion on that. I'm not 6 You have an opinion	_	3	_	
14 A. No. 15 1 fluid dynamics expert's report; correct? 15 1				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<b>A.</b> No.	14:01:47 11	-
15000 13 fluid dynamics expert's report; correct?  A. Correct.  Q. Which shows the airflow similar to the airflow similar to the airflow shows the airflow similar to the airflow that you saw; correct?  A. Correct.  Q. Would you				
14 A. Correct. 22 Significant particle increase over the surgical site? 23 Significant particle increase over the surgical site? 24 States, showed that the Bair Hugger does cause 25 Significant particle increase over the surgical site? 26 MS. LEWIS: Objection, form. 27 A. Correct. 28 Significant particle increase over the surgical site? 29 STIREWALT & ASSOCIATES 1-800-563-1953 info@sitewalt.com 20 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 21 Hugger is safe. 21 Understand that, but you looked at an airflow that was provided to you by the defense; 29 Correct? 20 States of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger. There's no expert opinion in her report on the safety of the Bair Hugger.				
1500 15				
15552 16 airflow that you saw; correct?  A. Correct.  Q. Would you  Would you have taken that into consideration if the plaintiffs' report, which was done by one of the leading experts in particle flow in the United 152000 22 States, showed that the Bair Hugger does cause significant particle increase over the surgical site?  MS. LEWIS: Objection, form.  A. Take it into consideration for  STIREWALT & ASSOCIATES  1-800-553-1953 info@stirewalt.com  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER  152000 2 A. No.  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER  152000 2 A. No.  MS. LEWIS: Objection, form.  A. I don't have an opinion on that. I'm not that kind of expert.  A. I don't have an opinion on that. I'm not that kind of expert.  Q. I understand that, but you looked at an inflow that was provided to you by the defense; correct?  A. No.  Q. Okay. Have you ever consulted for 3M A. No.  Q. Okay. Have you ever worked for 3M?  A. No.  Q. Please help me understand what exactly what exact methodology that you looked at or did to determine that the that the Bair Hugger is safe that the safe have you ever worked for 3M?  A. No.  Q. Please help me understand what exactly what exact methodology that you looked at or did to determine that the that the Bair Hugger is safe that the safe hugger is safe that is a safe that the safe hugger is safe that is a safe that is		_		
18 Q. Would you have taken that into consideration Would you have taken that into consideration Would you have taken that into consideration the plaintiffs' report, which was done by one of the plaintiffs' report, which was done by one of the plaintiffs' report, which was done by one of the plaintiffs' report, which was done by one of the plaintiffs' report, which was done by one of the plaintiffs' report, which was done by one of the leading experts in particle flow in the United the leading experts of Bair the United Experts  A. No.  180215 21  A. No.  180215 22  A. No.  180215 21  A. No.  180215 2		•		
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1 fit the plaintiffs' report, which was done by one of the leading experts in particle flow in the United 152000 22 1 states, showed that the Bair Hugger does cause 152000 22 2 152000 22		•		
tassus 21 the leading experts in particle flow in the United tassus 22 States, showed that the Bair Hugger does cause 3 significant particle increase over the surgical site?  4 MS. LEWIS: Objection, form.  5 Tarke it into consideration for		•		
tables 22 States, showed that the Bair Hugger does cause significant particle increase over the surgical site?  MS. LEWIS: Objection, form.  A. Take it into consideration for STIREWALT & ASSOCIATES  1-800-553-1953 info@stirewalt.com  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 166  183957 1 Q. In your opinions of whether or not the Bair Hugger is safe.  183958 2 A. No.  183959 4 MS. LEWIS: Objection, form.  48000 8 airflow that was provided to you by the defense; orrect?  48000 1 Q. Okay. Have you ever consulted for 3M before?  48000 1 Q. Have you ever worked for 3M?  48000 1 A. No.  Q. Please help me understand what exactly 18400 1 A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. No.  Q. Please help me understand what exactly 18400 1 D. A. From I believe I cite AORN as a 1850 2 C. Mell you've been a nurse for a long time;  1850 A. No.  MS. LEWIS: Objection, form.  A. From I believe I cite AORN as a 1860 2 C. Mell you've been a nurse for a long time;  1850 A. No.  MS. LEWis is objection form.  A. No.  Q. A. From I believe I cite AORN as a 1860 2 C. Mell you've been a nurse for a long time;  1850 A. No.  MS. LEWis is objection form.  A. Yes.  400 A. No.  Q. On page 4, last paragraph, you talk about the antiseptic solution to decrease the transient bacteria on the skin of a patient.  400 A. Pescarch has one of the Bair Hugger.  400 A. Pescarch has one of the Bair Hugger.  4100 A. No.  41				
13565 23 significant particle increase over the surgical site?  MS. LEWIS: Objection, form.  A. Take it into consideration for STIREWALT & ASSOCIATES 1-800-553-1953 info@stirewalt.com  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 166 12557 1 Q. In your opinions of whether or not the Bair 140025 3 A. No.  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 168 12559 3 A. No.  MS. LEWIS: Objection, form.  A. I don't have an opinion on that. I'm not 140005 6 that kind of expert.  Q. I understand that, but you looked at an 140005 7 Q. I understand that, but you looked at an 140005 9 Correct?  Q. Okay. Have you ever consulted for 3M 140005 1 Q. Okay. Have you ever worked for 3M? 140005 1 A. No. Q. Please help me understand what exactly 140005 1 A. No. Q. Please hel				
## MS. LEWIS: Objection, form.  A. Take it into consideration for STIREWALT & ASSOCIATES 1-800-553-1953 info@stirewalt.com  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 166  Q. In your opinions of whether or not the Bair Hugger is safe.  A. No. Hugger is safe.  A. No. Hugger is safe.  A. I don't have an opinion on that. I'm not Haddon for that kind of expert.  Q. I understand that, but you looked at an airflow that was provided to you by the defense; Correct?  Q. I understand that, but you looked at an before?  A. No.  A. Correct. Q. Okay. Have you ever consulted for 3M Hugger is a safe.  A. No.  A. No.  A. No.  A. No.  A. No.  A. Correct.  Q. Okay. Have you ever worked for 3M?  A. No.  Q. Please help me understand what exactly what exact methodology that you looked at or did to Haddon 19 Ha				
A. Take it into consideration for STIREWALT & ASSOCIATES 1-800-553-1953 info@stirewalt.com  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 166 153557 1 Q. In your opinions of whether or not the Bair 1400218 3 A. No. 1500218 2 Hugger is safe. 1500218 4 MS. LEWIS: Objection, form. 1500218 7 Q. I understand that, but you looked at an 1500219 1 Q. I understand that, but you looked at an 1500219 1 Q. Okay. Have you ever consulted for 3M 1500219 1 Q. Okay. Have you ever consulted for 3M 1500219 1 Q. Have you ever worked for 3M? 1500219 1 A. No. 1500219 1 Q. Have you ever worked for 3M? 1500219 1 Q. Have you ever worked for 3M? 1500219 1 A. No. 1500219 1 Q. Have you ever worked for 3M? 1500219 1 A. No. 1500219 1 Q. Have you ever worked for 3M? 1500219 1 A. No. 1500219 1 Q. Have you ever worked for 3M? 1500219 1 A. No. 1500219 1 Ms. LEWIS: It's a statement, it's not an expert opinion in that. "So she's not offering expert opinion on the safety of the Bair Hugger. 1500219 1 Ms. LEWIS: It's a statement, it's not an expert opinion. It describes that out, stipulate to cross that out, 1500219 1 Ms. LEWIS: It's a statement. It's not an expert opinion. It describes that have a provided to you be defense; 1500219 1 Ms. LEWIS: It's a statement. It's not an expert opinion. It describes that have the safety of the Bair Hugger. 1500219 1 Ms. LEWIS: It's a statement. It's not an expert opinion. It describes that have the safety of the Bair hugger. 1500219 1 Ms. LEWIS: Objection, form. 1500219 1 Ms. LEWIS: Objec				
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1-800-553-1953 info@stirewalt.com  CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 166  108  109  11900r opinions of whether or not the Bair 11900s  A. No. 1200s  MS. LEWIS: Objection, form. 14000s  6 that kind of expert. 1400s  7 Q. I understand that, but you looked at an airflow that was provided to you by the defense; orrect? 1400s  10 A. Correct. 1400s  10 A. Correct. 1400s  11 Q. Okay. Have you ever consulted for 3M  1400s  10 A. No. 1400s  11 Q. Have you ever worked for 3M? 1400s  15 A. No. 1400s  16 The Statement out, stipulate to cross that out, 1400s  16 The Statement out, stipulate to cross that out, 1400s  16 The Statement out, stipulate to cross that out, 1400s  16 The Statement out, stipulate to cross that out, 1400s  16 The Statement out, stipulate to cross that out, 1400s  17 The Statement out, stipulate to cross that out, 1400s  18 The Statement out, stipulate to cross that out, 1400s  18 The Statement out, stipulate to cross that out, 1400s  18 The Statement out, stipulate to cross that out, 1400s  18 The Statement out, stipulate to cross that out, 1400s  19 The Statement out, stipulate to cross that out, 1400s  10 The Statement out, stipulate to cross that out, 1400s  11 The Statement out, stipulate to cross that out, 1400s  11 The Statement out, stipulate to cross that out, 1400s  11 The Statement out, stipulate to cross that out, 1400s  11 The Statement out, stipulate to cross that out, 1400s  12 The Statement out, stipulate to cross that out, 1400s  1400s  13 A. No. 1400s  1400s  1400s  1400s  15 The Statement out, stipulate to cross that out, 1400s  1400s  15 The Statement out, stipulate to cross that out, 1400s  16 The Statement out, stipulate to cross that out, 1400s  1400s  15 The Statement out, stipulate to cross that out, 1400s  1400s  15 The Statement out, stipulate to cross that out, 1400s  1400s  16 The Statement out, stipulate to cross that out, 1400s  16 The Statement out, stipulate to cross that out, 1400s  16 The Statement out, stipulate to cross that out, 1400s  16 The Statement ou	10.00.00		11.02.17	· · · · · · · · · · · · · · · · · · ·
CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER 168  13 068 13 07 1 Q. In your opinions of whether or not the Bair 1400000 3 A. No. 1400000 5 A. I don't have an opinion on that. I'm not 1400000 6 that kind of expert. 1400000 8 airflow that was provided to you by the defense; 1400000 8 A. Correct. 1400000 1 A. Correct. 1400000 1 A. Correct. 1400000 1 A. No. 1400000 1				
1 Q. In your opinions of whether or not the Bair 135858 2 Hugger is safe. 135858 3 A. No. 135859 3 A. No. 135859 4 MS. LEWIS: Objection, form. 140001 5 A. I don't have an opinion on that. I'm not 140002 6 that kind of expert. 140008 8 airflow that was provided to you by the defense; 140008 11 Q. Okay. Have you ever consulted for 3M 140001 12 Defore? 140001 13 A. No. 140001 14 Q. Have you ever worked for 3M? 140001 15 A. No. 140001 16 Q. Please help me understand what exactly 140001 17 What was that the Bair Hugger. There's no expert opinion on the safety of the Bair Hugger. 140002 7 Q. I understand that, but you looked at an 140002 9 correct? 140002 11 Q. Okay. Have you ever consulted for 3M 140001 12 Defore? 140001 13 A. No. 140001 15 A. No. 140001 16 Q. Please help me understand what exactly 140001 18 determine that the that the Bair Hugger is safe 140002 10 A. Correct. 140002 11 Q. Please help me understand what exactly 140001 18 determine that the that the Bair Hugger is safe 140002 10 A. From I believe I cite AORN as a 140001 18 OA. From I believe I cite AORN as a 140002 20 A. From I believe I cite AORN as a 140002 21 Q. Well you've been a nurse for a long time;  140002 22 A. No. 140003 15 Safety of the Bair Hugger. 140002 17 A. Yes. 140002 11 MS. LEWIS: It's a statement, it's not an expert 140002 11 MS. LEWIS: It's a statement. It's not an expert 140002 11 MS. LEWIS: It's a statement. It's not an expert 140002 11 MS. LEWIS: It's a statement. It's not an expert 140002 11 MS. LEWIS: It's a statement out, stipulate to cross that out, 140002 11 MS. LEWIS: It's a statement out, stipulate to cross that out, 140002 11 MS. LEWIS: It's a statement out, stipulate to cross that out, 140002 11 MS. LEWIS: It's not an expert 140002 11 MS. LEWIS: It's a statement out, stipulate to cross that out, 140002 11 MS. LEWIS: It's not an expert 140		-		CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
Hugger is safe.  135959 3 A. No.  MS. LEWIS: Objection, form.  A. I don't have an opinion on that. I'm not that kind of expert.  140006 6 that kind of expert.  140006 7 Q. I understand that, but you looked at an airflow that was provided to you by the defense; correct?  140006 10 A. Correct.  140006 11 Q. Okay. Have you ever consulted for 3M  140007 14 Q. Have you ever worked for 3M?  140007 14 Q. Have you ever worked for 3M?  140008 15 A. No.  140008 16 A. No.  140008 17 Q. Have you ever worked for 3M?  140008 18 A. No.  140008 19 C. Please help me understand what exactly  140008 10 Q. Please help me understand what exactly  140008 10 Q. Please help me understand what exactly  140008 11 Q. Desides your predisposed determination based on your experience.  140008 12 A. From I believe I cite AORN as a recommendation, and the articles that I have attached, labeled 24 used.  140018 25 Q. Well you've been a nurse for a long time;  140018 26 Q. Well you've been a nurse for a long time;  140018 27 A. No.  140018 12 A. No.  140018 12 A. No.  140019 12 A. From I believe I cite AORN as a recommendation, and the articles that I have attached, labeled 24 Q. Well you've been a nurse for a long time;  140018 27 A. No.  140018 17 A. No.  140019 18 A. No.  140019 19 A		166		168
A. No.  MS. LEWIS: Objection, form.  A. I don't have an opinion on that. I'm not that that kind of expert.  Q. I understand that, but you looked at an airflow that was provided to you by the defense; correct?  A. Correct.  Q. Okay. Have you ever consulted for 3M  Leon's 14 Q. Have you ever worked for 3M?  A. No.  Q. Have you ever worked for 3M?  A. No.  Q. Please help me understand what exactly  Whos 15 A. No.  Q. Please help me understand what exactly  Whos 16 A. No.  Q. Please help me understand what exactly  Whos 17 A. No.  Q. Please help me understand what exactly  Whos 18 A. No.  Q. Please help me understand what exactly  Whos 19 besides your predisposed determination based on your experience.  MS. LEWIS: Objection, form.  A. No.  MS. LEWIS: Objection, form.  MR. ASSAAD: And Ms. Lewis, I assume that	13:59:57	Q. In your opinions of whether or not the Bair	14:02:19 1	road, but she's not offering an expert opinion on the
MS. LEWIS: Objection, form.  A. I don't have an opinion on that. I'm not that kind of expert.  40001 5 A. I don't have an opinion on that. I'm not that kind of expert.  40002 6 that kind of expert.  40003 6 that kind of expert.  40003 7 Q. I understand that, but you looked at an inflow that was provided to you by the defense;  40008 9 correct?  40009 10 A. Correct.  40009 11 Q. Okay. Have you ever consulted for 3M  40011 A. No.  4001 A. No.  40011 B. Safety of the Bair Hugger.  4001 A. SSAAD:  4001 A. No.  4001 B. Safety of the Bair Hugger.  4001 A. No.  4001 A. No.  4001 B. Safety of the Bair Hugger.  4001 A. No.  4001 B. Wall you've been a nurse for a long time;  4001 B. Wall you've been a nurse for a long time;  4001 B. A. No.  4001 A. Yes.  4001 B. Wall you've been a nurse for a long time;  4001 B. A. Yes.  4001 A. Yes.  4001 B. Wall you've been a nurse for a long time;  4001 B. Wall you've been a nurse for a long time;  4001 B. A. No.  4001 A. Yes.  4001 B. Wall you look at page 4. It states:  4001 B. Safe for use in the operating room.  4001 B. A. Yes.  4001 B. Wall you look at page 4. It sates:  4001 B. Safe for use in the operating room.  4001 B. A. Yes.  4001 B. Wall you're willing to cross that out, stipulate to cr	13:59:58 <b>2</b>	Hugger is safe.	14:02:22 <b>2</b>	safety of the Bair Hugger. There's no expert opinion
5 A. I don't have an opinion on that. I'm not table that kind of expert.  140003 6 that kind of expert.  140004 7 Q. I understand that, but you looked at an airflow that was provided to you by the defense; table of correct?  140008 9 correct?  140009 10 A. Correct.  140009 11 Q. Okay. Have you ever consulted for 3M  140016 12 before?  140016 13 A. No.  140017 14 Q. Have you ever worked for 3M?  140018 15 A. No.  140019 16 Q. Please help me understand what exactly  140019 18 determine that the that the Bair Hugger is safe  140019 18 besides your predisposed determination based on your  140019 21 A. From I believe I cite AORN as a  140118 22 A. From I believe I cite AORN as a  140128 24 used.  140128 25 Q. Well you've been a nurse for a long time;  14010 15 A. No.  14010 16 C. Please help me understand what exactly  140118 21 MS. LEWIS: Objection, form.  14010 17 MS. LEWIS: Objection, form.  14010 18 C. Please help me understand what exactly  140118 21 MS. LEWIS: Objection, form.  140118 22 A. From I believe I cite AORN as a  140118 24 used.  140119 18 MS. LEWIS: Objection, form.  140110 19 MS. LEWIS: Objection,	13:59:59 3	<b>A.</b> No.	14:02:25 3	in her report on the safety of the Bair Hugger.
th tack kind of expert.  140008 6 that kind of expert.  140008 7 Q. I understand that, but you looked at an  140008 8 airflow that was provided to you by the defense;  140008 9 correct?  140009 10 A. Correct.  140009 11 Q. Okay. Have you ever consulted for 3M  140016 12 before?  140016 13 A. No.  140017 14 Q. Have you ever worked for 3M?  140018 15 A. No.  140018 16 Q. Please help me understand what exactly  140018 17 what exact methodology that you looked at or did to  140018 18 determine that the that the Bair Hugger is safe  140116 22 A. From I believe I cite AORN as a  140128 24 used.  140018 15 Q. Well you've been a nurse for a long time;  140018 26 Safe for use in the operating room."  140008 7 A. Yes.  140029 8 MR. ASSAAD: If you're willing to cross that out,  140010 9 that statement out, stipulate to cross that out,  140011 11 Ill stop asking.  140011 9 that statement out, stipulate to cross that out,  140011 11 Ill stop asking.  140011 11 Ill stop asking.  140010 9 that statement out, stipulate to cross that out,  140011 11 Ill stop asking.  140010 11 Ill stop asking.  140010 11 Ill stop asking.  140011 11 Ill stop asking.  140010 11 Ill doesn't say, "it is my expert opinion that." So she's not offering expert opinion th	13:59:59 4	MS. LEWIS: Objection, form.	14:03:02 4	<b>Q.</b> If you look at page 4. It states:
140008 7 Q. I understand that, but you looked at an airflow that was provided to you by the defense; correct?  140008 9 correct?  140008 10 A. Correct.  140009 11 Q. Okay. Have you ever consulted for 3M 140016 12 before?  140016 13 A. No.  140017 14 Q. Have you ever worked for 3M?  140018 15 A. No.  140018 16 Q. Please help me understand what exactly that the eath that the that the Bair Hugger is safe 140018 18 determine that the that the Bair Hugger is safe 140018 21 A. From I believe I cite AORN as a recommendation, and the articles that I have attached, 140128 25 Q. Well you've been a nurse for a long time;  140018 15 Q. Well you've been a nurse for a long time;  140018 7 A. Yes.  14008 8 MR. ASSAAD: If you're willing to cross that out, 14009 9 that statement out, stipulate to cross that out, 14009 9 that statement out, stipulate to cross that out, 14009 11 II II stop asking.  140018 12 10 I'll stop asking.  140018 12 10 Stew I statement out, stipulate to cross that out, 14009 11 II II stop asking.  140018 12 10 I'll stop asking.  140018 12 10 Stew I statement out, stipulate to cross that out, 14009 11 II II stop asking.  140018 12 10 I'll stop asking.  140018 12 10 Stew I statement out, stipulate to cross that out, 14009 11 II II stop asking.  140018 12 10 I'll stop asking.  140018 12 0 Stew I Ste	14:00:01 <b>5</b>	<b>A.</b> I don't have an opinion on that. I'm not	14:03:04 <b>5</b>	"Research has shown forced-air warming devices to be
140008 8 airflow that was provided to you by the defense; 140008 9 correct? 140008 10 A. Correct. 140008 11 Q. Okay. Have you ever consulted for 3M 140016 12 before? 140018 13 A. No. 140017 14 Q. Have you ever worked for 3M? 140018 15 A. No. 140018 16 Q. Please help me understand what exactly	14:00:03 6	that kind of expert.	14:03:06 6	safe for use in the operating room."
14.00:08 9 correct? 14.00:09 10 A. Correct. 14.00:09 11 Q. Okay. Have you ever consulted for 3M 14.00:16 12 before? 14.00:16 13 A. No. 14.00:17 14 Q. Have you ever worked for 3M? 14.00:18 15 A. No. 14.00:18 15 A. No. 14.00:19 16 Q. Please help me understand what exactly 14.00:19 18 determine that the that the Bair Hugger is safe 14.00:10 19 besides your predisposed determination based on your 14.00:10 19 besides your predisposed determination based on your 14.00:10 12 1 MS. LEWIS: It's a statement, it's not an expert 14.00:10 19 besides your predisposed determination based on your 14.00:10 19 cyperience. 14.00:10 10 19 Desides your predisposed determination based on your 14.00:10 12 1 MS. LEWIS: Objection, form. 14.00:10 12 1 MS. LEWIS: Objection, form. 14.00:10 19 Desides your predisposed determination based on your 14.00:10 19 Desides your predisposed determination based on your 14.00:10 12 1 MS. LEWIS: Objection, form. 14.00:10 19 Desides your predisposed determination based on your 14.00:10 19 Desides your predisposed determination based on your 14.00:10 19 Desides your predisposed determination based on your 14.00:10 19 Desides your predisposed determination based on your 14.00:10 19 Desides your predisposed determination based on your 14.00:10 10 10 10 10 10 10 10 10 10 10 10 10 1	14:00:04 7	Q. I understand that, but you looked at an	14:03:08 7	<b>A.</b> Yes.
14.00.09 10 A. Correct. 14.00.09 11 Q. Okay. Have you ever consulted for 3M 14.00.16 12 before? 14.00.16 13 A. No. 14.00.17 14 Q. Have you ever worked for 3M? 14.00.18 15 A. No. 14.00.18 15 A. No. 14.00.19 16 Q. Please help me understand what exactly 14.00.19 18 determine that the that the Bair Hugger is safe 14.00.19 19 besides your predisposed determination based on your 14.01.10 19 besides your predisposed determination based on your 14.01.10 21 A. From I believe I cite AORN as a 14.01.22 23 recommendation, and the articles that I have attached, 14.01.22 25 Q. Well you've been a nurse for a long time;  14.00.12 10 I'll stop asking. 14.00.31 21 MS. LEWIS: It's a statement, it's not an opinion. It doesn't say, "it is my expert opinion that." So she's not offering expert opinions on the safety of the Bair Hugger. 14.00.32 14 that." So she's not offering expert opinions on the safety of the Bair Hugger. 14.00.32 15 BY MR. ASSAAD: 14.00.35 18 the antiseptic solution to decrease the transient bacteria on the skin of a patient. 14.01.01 19 bacteria on the skin of a patient. 14.01.01 20 A. Yes. 14.01.01 21 Q. Are you going to offer any opinions with respect to the different types of antiseptic solutions? 14.01.01 22 A. No. 14.01.01 23 MS. LEWIS: Objection, form. 14.01.01 22 A. From I believe I cite AORN as a 14.01.01 25 MR. ASSAAD: And Ms. Lewis, I assume that	14:00:06 8	airflow that was provided to you by the defense;	14:03:09	
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14:01:14 20 experience.  14:01:15 21 MS. LEWIS: Objection, form.  14:01:16 22 A. From I believe I cite AORN as a  14:01:21 23 recommendation, and the articles that I have attached,  14:01:22 24 used.  14:01:28 25 Q. Well you've been a nurse for a long time;  14:04:06 20 A. Yes.  14:04:06 21 Q. Are you going to offer any opinions with respect to the different types of antiseptic solutions?  14:04:05 24 A. No.  14:04:05 25 A. No.  14:04:05 25 MR. ASSAAD: And Ms. Lewis, I assume that				·
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14:01:28 <b>24</b> used. 14:01:28 <b>25 Q.</b> Well you've been a nurse for a long time; 14:05:01 <b>25</b> MR. ASSAAD: And Ms. Lewis, I assume that				
14:01:28 <b>25 Q.</b> Well you've been a nurse for a long time; 14:05:01 <b>25</b> MR. ASSAAD: And Ms. Lewis, I assume that				
CHICANALLY ASSETTINGES	14:01:28 <b>43</b>		14:05:01 <b>43</b>	
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1-800-553-1953 info@stirewalt.com 1-800-553-1953 info@stirewalt.com 42 of 49 sheets Page 165 to 168 of 189 08/07/2017 11:59:32	42 of 49 cha		168 of 180	_

	CASE 0:15-md-02666-JNE-DTS Doc.	<del>828-2</del>	Filed 09/12/17 Page 23 of 23 CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
	169		171
14:05:03	she's not going to offer any opinions on the efficacy	14:07:50 <b>1</b>	Q. So would it be fair to say that you really
14:05:05 <b>2</b>	of Bair Hugger; correct?	14:07:53 2	have no scientific basis to support that statement?
14:05:07 3	MS. LEWIS: I mean, she's not offering	14:07:55 3	A. Other than my own observations.
14:05:09 4	expert opinions on the efficacy or safety.	14:07:57 4	Q. Well an obser Is that a scie
14:05:11 <b>5</b>	MR. ASSAAD: Okay. Just Because she	14:07:59 <b>5</b>	Is your observation a scientific basis?
14:05:13 6	keeps on saying it. I want to make sure, if there's	14:08:01 6	<b>A.</b> No.
14:05:16 7	reference to it in her report that	14:08:02 7	Q. Okay. So you agree with me that there's no
14:05:18	MS. LEWIS: Not with respect to an expert	14:08:04	scientific basis to support that observa to support
14:05:20	opinion. I mean, if you want us to stipulate?	14:08:07	that statement; correct?
14:05:22 10	MR. ASSAAD: Yes.	14:08:07 10	<b>A.</b> There's no research or a scientific basis
14:05:22 11	MS. LEWIS: I'm saying there's not she's	14:08:09 11	that I know of.
14:05:24 12	not offering an expert opinion on the safety of the	14:08:09 12	Q. So the
14:05:26 13	Bair Hugger.	14:08:10 13	A. There may be some.
14:05:27 14	MR. ASSAAD: Or efficacy.	14:08:11 14	<b>Q.</b> So the answer to my question previously is
14:05:28 15	MS. LEWIS: Or efficacy.	14:08:13 15	"correct."
14:05:29 16	MR. ASSAAD: Okay.	14:08:13 16	A. Yes.
14:05:29 <b>17</b> 14:05:45 <b>18</b>	BY MR. ASSAAD:	14:09:00 17	Q. Are you aware that there are orthopedic
14:05:45 18	<b>Q.</b> Are you going to offer opinions on draping of a in a total knee or total hip arthroplasty?	14:09:05 <b>18</b> 14:09:09 <b>19</b>	surgeons that do not use the Bair Hugger? <b>A.</b> Not in my practice in my experience.
14:05:47 19	<b>A.</b> No.	14:09:09 19	They've all used them.
14:06:05 21	Q. You say here that: "Sterile light handle	14:09:55 21	<b>Q.</b> In the Kellam paper it states that inad
14:06:07 <b>22</b>	covers may be attached to the surgical lights by any	14:10:00 <b>22</b>	inadvertent perioperative hypothermia is defined as a
14:06:10 23	team member."	14:10:03 23	core body temperature of less than 36 degrees, and
14:06:11 24	A. Correct.	14:10:05 <b>24</b>	that's different than what you said of 37.
14:06:12 <b>25</b>	Q. Is that what we talked about before for the	14:10:07 <b>25</b>	A. I will I will defer to the experts. I
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	170		172
14:06:14	handles of the lights?	14:10:10 1	don't know.
14:06:17 2	<ul><li>A. Correct.</li><li>Q. On page 5, fourth paragraph from the bottom</li></ul>	14:10:11 <b>2</b>	<ul><li>Q. Okay.</li><li>A. I believe I said there was a range that was</li></ul>
14:07:06 <b>3</b>	you state: "During the surgical procedure, the	14:10:17 <b>3</b> 14:10:20 <b>4</b>	usually defined by anesthesia.
14:07:10 4	surgeon and the scrub nurse stand across the operating	14:10:20 <b>5</b>	Q. Do you consider everything that AORN
14:07:16	room bed from each other. Throughout the procedure,	14:11:02 6	publishes authoritative?
14:07:18 7	the surgical team is passing instruments and sponges	14:11:05 7	<b>A.</b> Yes. That's a strong word, but yes.
14:07:20 8	back and forth across the surgical site which can	14:11:10 8	Q. So AORN's never wrong.
14:07:23	potentially create air current disturbances."	14:11:12 9	<b>A.</b> No.
14:07:26 10	What's your basis behind that?	14:11:13 10	<b>Q.</b> Even though they may change, from time to
14:07:29 11	<b>A.</b> Observations. Just watching instruments	14:11:16 11	time, their recommendations.
14:07:32 12	being handled back and forth I know there's some	14:11:17 12	A. Correct.
14:07:34 13	changes.	14:11:18 13	Q. Okay. But AORN doesn't perform scientific
14:07:35 14	Q. Well that's obvious because you're moving to	14:11:55 14	studies, they just do mostly literature reviews;
14:07:37 15	perform an operation.	14:11:58 15	correct?
14:07:38 16	A. Absolutely.	14:11:59 16	A. Correct.
14:07:40 <b>17</b> 14:07:42 <b>18</b>	<b>Q.</b> But why do you think it causes air current disturbances? What's your basis?	14:12:00 <b>17</b> 14:12:04 <b>18</b>	<b>Q.</b> Because AORN is basically a nursing organization; correct?
14:07:42 10	<b>A.</b> Just my own personal knowledge.	14:12:04 10	A. Professional, yes. Professional nursing
14:07:44 19	Q. Have you measured	14:12:05 19	organization.
14:07:46 21	A. No,	14:12:10 21	Q. Okay. So my understanding is AORN is
14:07:46 <b>22</b>	<b>Q.</b> any air	14:12:24 <b>22</b>	rarely rarely publishes, like, peer-reviewed
14:07:46 23	A I have not.	14:12:27 23	literature regarding scientific studies.
14:07:48 <b>24</b>	Q. Have you felt any air current disturbances?	14:12:28 <b>24</b>	MS. LEWIS: Objection, form.
14:07:50 <b>25</b>	A. No.	14:12:29 <b>25</b>	A. Their journal is a peer-reviewed journal
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